

# 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.

Veterans for Responsible Leadership

ADDRESS (number and street)

Check if different than previously reported. (ACC)

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

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

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)
  - Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)
  - Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)  General (12G)  Runoff (12R)
  - Convention (12C)  Special (12S)

Election on  /  /  in the State of

- (d) 30-Day POST-Election Report for the:
- General (30G)  Runoff (30R)  Special (30S)

Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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

Type or Print Name of Treasurer Barkuff, Daniel, , ,

Signature of Treasurer Barkuff, Daniel, , , Date  /  /

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

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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Veterans for Responsible Leadership

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="2023"/>		<input type="text" value="92156.04"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="92156.04"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="48738.71"/>	<input type="text" value="48738.71"/>
(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="140894.75"/>	<input type="text" value="140894.75"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="72452.85"/>	<input type="text" value="72452.85"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="68441.90"/>	<input type="text" value="68441.90"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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 the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)**

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Veterans for Responsible Leadership**

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	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	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 Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	0.00	0.00
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).....	850.64	850.64
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	47888.07	47888.07
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)).....▶	48738.71	48738.71
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	48738.71	48738.71

**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 .....	60.00	60.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	60.00	60.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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).....	72392.85	72392.85
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)) ..	72452.85	72452.85
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	72452.85	72452.85

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	0.00	0.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	60.00	60.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	850.64	850.64
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	- 790.64	- 790.64

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA  
Transaction ID :

The Committee respectfully submits this amendment to correct discrepancies discovered during an internal audit. The differences in receipts and disbursements are from the previous compliance firm not disclosing them correctly. The Committee has engaged with a new compliance firm to help prevent this from happening again. The Committee will be amending all subsequent reports.

Form/Schedule:  
Transaction ID:

# 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 82
<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <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)  
**Veterans for Responsible Leadership**

**A. We the Veterans Foundation**

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

Mailing Address 600 Pennsylvania Ave SE  
Unit 15845

City Washington	State DC	Zip Code 20003-7534
--------------------	-------------	------------------------

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 ▼  
850.64

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03	/	10	/	2023

**Transaction ID : 6145553**

Amount of Each Receipt this Period  
850.64

Memo Item

Offset for Slack Subscription

**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
	/		/	

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
	/		/	

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	850.64
<b>TOTAL</b> This Period (last page this line number only).....▶	850.64

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 82
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Veterans for Responsible Leadership**

**A. Rothhouse, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3 Harvest Ct  
 City Egg Harbor Township State NJ Zip Code 08234-9660  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Benjamin F. Edwards Co. Occupation (for Individual) Financial Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **02 / 08 / 2023**  
**Transaction ID : 5363729**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Non-Contribution Account

**B. Nowak, Wyatt, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 63 Staples Ave  
 City San Francisco State CA Zip Code 94131-3132  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) University of California San Francisco Occupation (for Individual) Nurse  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.90

Date of Receipt **02 / 09 / 2023**  
**Transaction ID : 5363938**  
 Amount of Each Receipt this Period 103.45  
 Memo Item  
 Non-Contribution Account

**C. Downs, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3012 Wood Lake Dr  
 City Waco State TX Zip Code 76710-1267  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Investor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 206.90

Date of Receipt **02 / 10 / 2023**  
**Transaction ID : 5367041**  
 Amount of Each Receipt this Period 103.45  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1206.90
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 82
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Veterans for Responsible Leadership**

**A. Chapman, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 585 Grove St  
 Ste 145  
 City Herndon State VA Zip Code 20170-4791  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.90

Date of Receipt **02 / 20 / 2023**  
**Transaction ID : 5380881**  
 Amount of Each Receipt this Period 103.45  
 Memo Item  
 Non-Contribution Account

**B. Mixon, Lucas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 611 Pennsylvania Ave SE  
 Ste 144  
 City Washington State DC Zip Code 20003-4303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **03 / 05 / 2023**  
**Transaction ID : 5421032**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Non-Contribution Account

**C. Downs, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3012 Wood Lake Dr  
 City Waco State TX Zip Code 76710-1267  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Investor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 310.35

Date of Receipt **03 / 10 / 2023**  
**Transaction ID : 5429111**  
 Amount of Each Receipt this Period 103.45  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1206.90
<b>TOTAL</b> This Period (last page this line 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 82
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Veterans for Responsible Leadership**

**A. Mixon, Lucas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 611 Pennsylvania Ave SE  
 Ste 144  
 City Washington State DC Zip Code 20003-4303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt **03 / 16 / 2023**  
**Transaction ID : 5440827**  
 Amount of Each Receipt this Period 3000.00  
 Memo Item  
 Non-Contribution Account

**B. Pomerleau, Ernest, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 69 College St  
 City Burlington State VT Zip Code 05401-8403  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Real Estate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **03 / 19 / 2023**  
**Transaction ID : 5442915**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Non-Contribution Account

**C. Chapman, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 585 Grove St  
 Ste 145  
 City Herndon State VA Zip Code 20170-4791  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 310.35

Date of Receipt **03 / 20 / 2023**  
**Transaction ID : 5443320**  
 Amount of Each Receipt this Period 103.45  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4103.45
<b>TOTAL</b> This Period (last page this line 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 11 OF 82  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Veterans for Responsible Leadership**

**A. Downs, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3012 Wood Lake Dr  
 City Waco State TX Zip Code 76710-1267  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Investor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 413.80

Date of Receipt **04 / 10 / 2023**  
**Transaction ID : 5473327**  
 Amount of Each Receipt this Period 103.45  
 Memo Item  
 Non-Contribution Account

**B. Chapman, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 585 Grove St Ste 145  
 City Herndon State VA Zip Code 20170-4791  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 413.80

Date of Receipt **04 / 20 / 2023**  
**Transaction ID : 5491143**  
 Amount of Each Receipt this Period 103.45  
 Memo Item  
 Non-Contribution Account

**C. Henry, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 421 SE Port Ave  
 City Lincoln City State OR Zip Code 97367-3018  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 207.32

Date of Receipt **04 / 20 / 2023**  
**Transaction ID : 5491184**  
 Amount of Each Receipt this Period 51.83  
 Memo Item  
 Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 258.73  
**TOTAL** This Period (last page this line 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 82
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Veterans for Responsible Leadership**

**A. Anderson, Bjorn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4414 Coquina Dr  
 City Jacksonville Beach State FL Zip Code 32250-2108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Meunier Carlin & Curfman LLC Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 516.45

Date of Receipt 05 / 08 / 2023  
**Transaction ID : 5521623**  
 Amount of Each Receipt this Period 516.45  
 Memo Item  
 Non-Contribution Account

**B. Frey, Gunnar, Alan, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21 W Boulder St  
 City Colorado Springs State CO Zip Code 80903-3370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 516.45

Date of Receipt 05 / 08 / 2023  
**Transaction ID : 5521998**  
 Amount of Each Receipt this Period 516.45  
 Memo Item  
 Non-Contribution Account

**C. Mixon, Lucas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 611 Pennsylvania Ave SE Ste 144  
 City Washington State DC Zip Code 20003-4303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 6500.00

Date of Receipt 05 / 08 / 2023  
**Transaction ID : 5521774**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3532.90
<b>TOTAL</b> This Period (last page this line 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 82
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Veterans for Responsible Leadership**

**A. Downs, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3012 Wood Lake Dr  
 City Waco State TX Zip Code 76710-1267  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Investor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 517.25

Date of Receipt 05 / 10 / 2023  
**Transaction ID : 5523861**  
 Amount of Each Receipt this Period 103.45  
 Memo Item  
 Non-Contribution Account

**B. Friedman, Diana, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2001 Wilshire Blvd Ste 650  
 City Santa Monica State CA Zip Code 90403-5864  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2581.45

Date of Receipt 05 / 11 / 2023  
**Transaction ID : 5524370**  
 Amount of Each Receipt this Period 2581.45  
 Memo Item  
 Non-Contribution Account

**C. Matthews, Timothy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 43852 River View Ln  
 City Leonardtown State MD Zip Code 20650-6083  
 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 ▼ 361.77

Date of Receipt 05 / 11 / 2023  
**Transaction ID : 5524503**  
 Amount of Each Receipt this Period 258.32  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2943.22
<b>TOTAL</b> This Period (last page this line 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 82
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Veterans for Responsible Leadership**

**A. Tawa, Nicholas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17 Tubwreck Dr  
 City Medfield State MA Zip Code 02052-1430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Beth Israel, Boston Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1032.70

Date of Receipt **05 / 11 / 2023**  
**Transaction ID : 5524201**  
 Amount of Each Receipt this Period 1032.70  
 Memo Item  
 Non-Contribution Account

**B. Booth, Allyson, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 Cedar St NW Apt 5  
 City Washington State DC Zip Code 20012-1942  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) US Naval Academy Occupation (for Individual) retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.15

Date of Receipt **05 / 12 / 2023**  
**Transaction ID : 5524805**  
 Amount of Each Receipt this Period 258.32  
 Memo Item  
 Non-Contribution Account

**C. Ravey, Guy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2340 Valle Rio Way  
 City Virginia Beach State VA Zip Code 23456-6739  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Southwest Airlines Occupation (for Individual) Airline Pilot  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **05 / 16 / 2023**  
**Transaction ID : 5539126**  
 Amount of Each Receipt this Period 300.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1591.02
<b>TOTAL</b> This Period (last page this line 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 82
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Veterans for Responsible Leadership**

**A. Schreiber, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 112 Hillingdon Rd  
 City New Marlborough State MA Zip Code 01230-2204  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Connecticut Childrens Hospital Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 16 / 2023**  
**Transaction ID : 5539695**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non-Contribution Account

**B. Henry, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 421 SE Port Ave  
 City Lincoln City State OR Zip Code 97367-3018  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 259.15

Date of Receipt **05 / 20 / 2023**  
**Transaction ID : 5542603**  
 Amount of Each Receipt this Period 51.83  
 Memo Item  
 Non-Contribution Account

**C. Ammann, Lawrence, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17753 Julie Ann Ct  
 City Hamilton State VA Zip Code 20158-3450  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 22 / 2023**  
**Transaction ID : 5544203**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	551.83
<b>TOTAL</b> This Period (last page this line 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 82  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Veterans for Responsible Leadership**

**A. Tolle, Bryan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1801 Highland Dr  
 City La Grande State OR Zip Code 97850-3209  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Grande Rhonde Hospital Occupation (for Individual) Doctor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 258.32

Date of Receipt **05 / 22 / 2023**  
**Transaction ID : 5548410**  
 Amount of Each Receipt this Period 258.32  
 Memo Item  
 Non-Contribution Account

**B. Ahrens, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4429 Arch Creek Dr  
 City Jacksonville State FL Zip Code 32257-8042  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Professor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.90

Date of Receipt **06 / 02 / 2023**  
**Transaction ID : 5560312**  
 Amount of Each Receipt this Period 103.45  
 Memo Item  
 Non-Contribution Account

**C. Richey, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 545 Driftwood Cir  
 City New Brighton State MN Zip Code 55112-2500  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Estes Express Lines Occupation (for Individual) Truck Driver  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 218.04

Date of Receipt **06 / 02 / 2023**  
**Transaction ID : 5560021**  
 Amount of Each Receipt this Period 36.34  
 Memo Item  
 Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 398.11  
**TOTAL** This Period (last page this line 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 82
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Veterans for Responsible Leadership**

**A. Vosburgh, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2757 County Road 3672  
 City Springtown State TX Zip Code 76082-4287  
 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 ▼ 25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 06 / 2023  
**Transaction ID : 5564341**  
 Amount of Each Receipt this Period  
 25000.00  
 Memo Item  
 Non-Contribution Account

**B. Heavey, Jonathan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20922 Avalon Dr  
 City Rocky River State OH Zip Code 44116-1304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) YNHH Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 258.32

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 09 / 2023  
**Transaction ID : 5565737**  
 Amount of Each Receipt this Period  
 258.32  
 Memo Item  
 Non-Contribution Account

**C. Downs, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3012 Wood Lake Dr  
 City Waco State TX Zip Code 76710-1267  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Investor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 620.70

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2023  
**Transaction ID : 5565992**  
 Amount of Each Receipt this Period  
 103.45  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	25361.77
<b>TOTAL</b> This Period (last page this line 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 82
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Veterans for Responsible Leadership**

**A. Ackerman, Cheryl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1969 Brookings Dr  
 City Colorado Springs State CO Zip Code 80951-4780  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Aristocrat Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.15

Date of Receipt **06 / 14 / 2023**  
**Transaction ID : 5572972**  
 Amount of Each Receipt this Period 258.32  
 Memo Item  
 Non-Contribution Account

**B. Henry, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 421 SE Port Ave  
 City Lincoln City State OR Zip Code 97367-3018  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.98

Date of Receipt **06 / 20 / 2023**  
**Transaction ID : 5582495**  
 Amount of Each Receipt this Period 51.83  
 Memo Item  
 Non-Contribution Account

**C. Rodriguez, Gail, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1213 Blue Johnson Rd  
 City Hopkins State SC Zip Code 29061-9072  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VRX, Inc. Occupation (for Individual) Engineer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 20 / 2023**  
**Transaction ID : 5580844**  
 Amount of Each Receipt this Period 35.00  
 Memo Item  
 Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	345.15
<b>TOTAL</b> This Period (last page this line number only).....	41499.98

**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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500024132**

Amount of Each Disbursement this Period

[REDACTED] 1.22

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

**B. Paragon Payment Solutions**

Mailing Address 2141 E Broadway Rd  
Ste 202

City  
Tempe

State  
AZ

Zip Code  
85282-1895

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021149**

Amount of Each Disbursement this Period

[REDACTED] 114.56

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

**C. Google**

Mailing Address 1600 Amphitheatre Pkwy

City  
Mountain View

State  
CA

Zip Code  
94043-1351

Purpose of Disbursement  
Google Apps

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	5		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021155**

Amount of Each Disbursement this Period

[REDACTED] 102.00

Memo Item  Non-Contribution Account

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

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

[REDACTED] 217.78

[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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

**A. Google**

Mailing Address 1600 Amphitheatre Pkwy

City  
Mountain View

State  
CA

Zip Code  
94043-1351

Purpose of Disbursement

Google Apps

Candidate Name

Category/  
Type

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	1		0	5		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021156**

Amount of Each Disbursement this Period

[REDACTED] 35.01

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

**B. Google**

Mailing Address 1600 Amphitheatre Pkwy

City  
Mountain View

State  
CA

Zip Code  
94043-1351

Purpose of Disbursement

Google Apps

Candidate Name

Category/  
Type

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	1		0	5		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021157**

Amount of Each Disbursement this Period

[REDACTED] 108.00

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement

Credit Card Processing Fee

Candidate Name

Category/  
Type

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	1		0	6		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021801**

Amount of Each Disbursement this Period

[REDACTED] 1.76

Memo Item  Non-Contribution Account

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

[REDACTED] 144.77

**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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		09		2023

FEC Identification Number

C [REDACTED]

Transaction ID : 500021802

Amount of Each Disbursement this Period

[REDACTED] 1.22

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		09		2023

FEC Identification Number

C [REDACTED]

Transaction ID : 500021803

Amount of Each Disbursement this Period

[REDACTED] 4.10

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		09		2023

FEC Identification Number

C [REDACTED]

Transaction ID : 500021804

Amount of Each Disbursement this Period

[REDACTED] 1.19

Memo Item Non-Contribution Account

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

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

[REDACTED] 6.51

[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)

Grid for line numbers 21b-30b with checkboxes, where 29 is checked.

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NAME OF COMMITTEE (In Full)
Veterans for Responsible Leadership

Form A: Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, Memo Item.

Form B: Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, Memo Item.

Form C: Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	6		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500024133**

Amount of Each Disbursement this Period

[REDACTED] 0.87

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	7		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500024318**

Amount of Each Disbursement this Period

[REDACTED] 64.40

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. ProSoundGear

Mailing Address 1225 NW 93rd Ct

City  
Doral

State  
FL

Zip Code  
33172-2848

Purpose of Disbursement  
Office Equipment

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	7		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021726**

Amount of Each Disbursement this Period

[REDACTED] 338.24

Memo Item Non-Contribution Account

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

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

[REDACTED] 403.51

[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)

Grid for line numbers 21b-30b with checkboxes, where 29 is checked.

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NAME OF COMMITTEE (In Full)
Veterans for Responsible Leadership

Form A: Rode-RS.com. Includes fields for Full Name, Mailing Address (8 Thornton Rd), City (Oakland), State (NJ), Zip Code (07436-3116), Purpose of Disbursement (Office Equipment), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (01/17/2023), FEC Identification Number, Transaction ID (500021167), Amount of Each Disbursement (399.62), and Memo Item checkbox.

Form B: Paypal. Includes fields for Full Name, Mailing Address (2211 N 1st St), City (San Jose), State (CA), Zip Code (95131-2021), Purpose of Disbursement (Credit Card Processing Fee), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (01/18/2023), FEC Identification Number, Transaction ID (500021808), Amount of Each Disbursement (1.22), and Memo Item checkbox.

Form C: Printful, Inc. Includes fields for Full Name, Mailing Address (11025 Westlake Dr), City (Charlotte), State (NC), Zip Code (28273-3782), Purpose of Disbursement (Fundraising Supplies), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (01/18/2023), FEC Identification Number, Transaction ID (500021166), Amount of Each Disbursement (138.35), and Memo Item checkbox.

SUBTOTAL of Disbursements This Page (optional) 539.19
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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

**A. Printful, Inc.**

Mailing Address 11025 Westlake Dr

City  
Charlotte

State  
NC

Zip Code  
28273-3782

Purpose of Disbursement

Printing Expenses

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	1		1	8		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500024140**

Amount of Each Disbursement this Period

[REDACTED] 71.75

Memo Item \* Non-Contribution Account

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement

Credit Card Processing Fee

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	1		2	0		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021811**

Amount of Each Disbursement this Period

[REDACTED] 1.71

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement

Credit Card Processing Fee

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	1		2	3		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021810**

Amount of Each Disbursement this Period

[REDACTED] 1.54

Memo Item Non-Contribution Account

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

[REDACTED] 3.25

**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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

**A. Wix.com**

Mailing Address 235 W 23rd St

City  
New York

State  
NY

Zip Code  
10011-2371

Purpose of Disbursement

Website

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	3		2	0	2	3

FEC Identification Number

C [ ]

**Transaction ID : 500021164**

Amount of Each Disbursement this Period

[ ] 89.04

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

**B. Blue Cross Blue Shield**

Mailing Address 225 N Michigan Ave

City  
Chicago

State  
IL

Zip Code  
60601-7757

Purpose of Disbursement

Health Insurance

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	2	3

FEC Identification Number

C [ ]

**Transaction ID : 500021165**

Amount of Each Disbursement this Period

[ ] 315.30

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement

Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	2	3

FEC Identification Number

C [ ]

**Transaction ID : 500021809**

Amount of Each Disbursement this Period

[ ] 1.23

Memo Item Non-Contribution Account

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

[ ] 405.57

**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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		27		2023

FEC Identification Number

C [REDACTED]

Transaction ID : 500021812

Amount of Each Disbursement this Period

[REDACTED] 1.19

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Payroll Data Processing

Mailing Address 4224 Henderson Blvd

City  
Tampa

State  
FL

Zip Code  
33629-5611

Purpose of Disbursement  
Payroll Processing Fee

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		27		2023

FEC Identification Number

C [REDACTED]

Transaction ID : 500021154

Amount of Each Disbursement this Period

[REDACTED] 6.74

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Intuit Inc.

Mailing Address 2700 Coast Ave

City  
Mountain View

State  
CA

Zip Code  
94043-1140

Purpose of Disbursement  
Software

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		30		2023

FEC Identification Number

C [REDACTED]

Transaction ID : 500021163

Amount of Each Disbursement this Period

[REDACTED] 85.00

Memo Item Non-Contribution Account

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

[REDACTED] 92.93

**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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Payroll Data Processing

Mailing Address 4224 Henderson Blvd

City  
Tampa

State  
FL

Zip Code  
33629-5611

Purpose of Disbursement

Payroll Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500024020

Amount of Each Disbursement this Period

[REDACTED] 47.73

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Paragon Payment Solutions

Mailing Address 2141 E Broadway Rd  
Ste 202

City  
Tempe

State  
AZ

Zip Code  
85282-1895

Purpose of Disbursement

Merchant Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	2		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500021277

Amount of Each Disbursement this Period

[REDACTED] 54.43

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Google

Mailing Address 1600 Amphitheatre Pkwy

City  
Mountain View

State  
CA

Zip Code  
94043-1351

Purpose of Disbursement

Google Apps

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	6		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500021280

Amount of Each Disbursement this Period

[REDACTED] 43.23

Memo Item Non-Contribution Account

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

[REDACTED] 145.39

**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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

**A. Google**

Mailing Address 1600 Amphitheatre Pkwy

City  
Mountain View

State  
CA

Zip Code  
94043-1351

Purpose of Disbursement

Google Apps

Candidate Name

Category/  
Type

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
0	2			0	6			2	0	2	3		

FEC Identification Number

C

**Transaction ID : 500021281**

Amount of Each Disbursement this Period

109.55

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

**B. Google**

Mailing Address 1600 Amphitheatre Pkwy

City  
Mountain View

State  
CA

Zip Code  
94043-1351

Purpose of Disbursement

Google Apps

Candidate Name

Category/  
Type

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
0	2			0	6			2	0	2	3		

FEC Identification Number

C

**Transaction ID : 500021282**

Amount of Each Disbursement this Period

102.00

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement

Credit Card Processing Fee

Candidate Name

Category/  
Type

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
0	2			0	8			2	0	2	3		

FEC Identification Number

C

**Transaction ID : 500021842**

Amount of Each Disbursement this Period

2.30

Memo Item  Non-Contribution Account

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

213.85

**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)

Grid for line numbers: 21b, 22, 23, 26, 27, 28a, 28b, 28c, 29, 30b. Line 29 is checked.

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NAME OF COMMITTEE (In Full)

Veterans for Responsible Leadership

Full Name (Last, First, Middle Initial)

A. Paypal

Mailing Address 2211 N 1st St

City San Jose State CA Zip Code 95131-2021

Purpose of Disbursement Credit Card Processing Fee

Candidate Name

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

Date of Disbursement

Date selection: 02 / 08 / 2023

FEC Identification Number

FEC ID: C

Transaction ID : 500021843

Amount of Each Disbursement this Period

Amount: 35.39

Non-Contribution Account Memo Item

Full Name (Last, First, Middle Initial)

B. Paypal

Mailing Address 2211 N 1st St

City San Jose State CA Zip Code 95131-2021

Purpose of Disbursement Credit Card Processing Fee

Candidate Name

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

Date of Disbursement

Date selection: 02 / 09 / 2023

FEC Identification Number

FEC ID: C

Transaction ID : 500021838

Amount of Each Disbursement this Period

Amount: 1.19

Non-Contribution Account Memo Item

Full Name (Last, First, Middle Initial)

C. Paypal

Mailing Address 2211 N 1st St

City San Jose State CA Zip Code 95131-2021

Purpose of Disbursement Credit Card Processing Fee

Candidate Name

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

Date of Disbursement

Date selection: 02 / 09 / 2023

FEC Identification Number

FEC ID: C

Transaction ID : 500021839

Amount of Each Disbursement this Period

Amount: 1.22

Non-Contribution Account Memo Item

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

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

Subtotal: 37.80

Total: [Blank]

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)

Grid for line numbers 21b-30b with checkboxes, where 29 is checked.

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NAME OF COMMITTEE (In Full)

Veterans for Responsible Leadership

Full Name (Last, First, Middle Initial)

A. Paypal

Mailing Address 2211 N 1st St

City San Jose State CA Zip Code 95131-2021

Purpose of Disbursement Credit Card Processing Fee
Candidate Name

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

Date of Disbursement

Date selection box: MM/DD/YYYY = 02/09/2023

FEC Identification Number

FEC ID box: C

Transaction ID : 500021840

Amount of Each Disbursement this Period

Amount box: 1.22

Non-Contribution Account Memo Item

Full Name (Last, First, Middle Initial)

B. Paypal

Mailing Address 2211 N 1st St

City San Jose State CA Zip Code 95131-2021

Purpose of Disbursement Credit Card Processing Fee
Candidate Name

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

Date of Disbursement

Date selection box: MM/DD/YYYY = 02/09/2023

FEC Identification Number

FEC ID box: C

Transaction ID : 500021841

Amount of Each Disbursement this Period

Amount box: 4.10

Non-Contribution Account Memo Item

Full Name (Last, First, Middle Initial)

C. Paypal

Mailing Address 2211 N 1st St

City San Jose State CA Zip Code 95131-2021

Purpose of Disbursement Credit Card Processing Fee
Candidate Name

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

Date of Disbursement

Date selection box: MM/DD/YYYY = 02/10/2023

FEC Identification Number

FEC ID box: C

Transaction ID : 500021837

Amount of Each Disbursement this Period

Amount box: 4.10

Non-Contribution Account Memo Item

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

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

Subtotal box: 9.42

Total box: (empty)

# 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	1		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021836**

Amount of Each Disbursement this Period

[REDACTED] 0.77

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	4		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021835**

Amount of Each Disbursement this Period

[REDACTED] 1.22

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	6		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021834**

Amount of Each Disbursement this Period

[REDACTED] 0.87

Memo Item  Non-Contribution Account

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

[REDACTED] 2.86

**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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	7		2	0	2	3

FEC Identification Number

C [ ]

**Transaction ID : 500021833**

Amount of Each Disbursement this Period

[ ] 1.53

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	8		2	0	2	3

FEC Identification Number

C [ ]

**Transaction ID : 500021832**

Amount of Each Disbursement this Period

[ ] 1.22

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	0		2	0	2	3

FEC Identification Number

C [ ]

**Transaction ID : 500021831**

Amount of Each Disbursement this Period

[ ] 1.71

Memo Item Non-Contribution Account

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

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

[ ] 4.46

[ ]

# 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

**A. Wix.com**

Mailing Address 235 W 23rd St

City  
New York

State  
NY

Zip Code  
10011-2371

Purpose of Disbursement

Website Hosting

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	1		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021384**

Amount of Each Disbursement this Period

[REDACTED] 89.04

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement

Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500024134**

Amount of Each Disbursement this Period

[REDACTED] 1.54

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

**C. Blue Cross Blue Shield**

Mailing Address 225 N Michigan Ave

City  
Chicago

State  
IL

Zip Code  
60601-7757

Purpose of Disbursement

Health Insurance

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021793**

Amount of Each Disbursement this Period

[REDACTED] 315.30

Memo Item Non-Contribution Account

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

[REDACTED] 405.88

**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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021814**

Amount of Each Disbursement this Period

[REDACTED] 1.19

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021815**

Amount of Each Disbursement this Period

[REDACTED] 1.71

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Payroll Data Processing

Mailing Address 4224 Henderson Blvd

City  
Tampa

State  
FL

Zip Code  
33629-5611

Purpose of Disbursement  
Payroll - See Memos

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021785**

Amount of Each Disbursement this Period

[REDACTED] 4797.17

Memo Item Non-Contribution Account

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

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

[REDACTED] 4800.07

[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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

**A. Estes, Abbie, Patterson, ,**

Mailing Address PO Box 996

City  
Fairhope

State  
AL

Zip Code  
36533-0996

Purpose of Disbursement

Payroll

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500023824**

Amount of Each Disbursement this Period

[REDACTED] 4797.17

Memo Item \* Non-Contribution Account

Full Name (Last, First, Middle Initial)

**B. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City  
Tampa

State  
FL

Zip Code  
33629-5611

Purpose of Disbursement

Payroll Taxes

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500024021**

Amount of Each Disbursement this Period

[REDACTED] 1958.70

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

**C. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City  
Tampa

State  
FL

Zip Code  
33629-5611

Purpose of Disbursement

Payroll Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500024022**

Amount of Each Disbursement this Period

[REDACTED] 62.73

Memo Item Non-Contribution Account

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

[REDACTED] 2021.43

**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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	01	/	2023

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021828**

Amount of Each Disbursement this Period

[REDACTED] 4.10

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Intuit Inc.

Mailing Address 2700 Coast Ave

City  
Mountain View

State  
CA

Zip Code  
94043-1140

Purpose of Disbursement  
Software

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	02	/	2023

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021792**

Amount of Each Disbursement this Period

[REDACTED] 85.00

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Paragon Payment Solutions

Mailing Address 2141 E Broadway Rd  
Ste 202

City  
Tempe

State  
AZ

Zip Code  
85282-1895

Purpose of Disbursement  
Merchant Fees

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	02	/	2023

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021784**

Amount of Each Disbursement this Period

[REDACTED] 45.33

Memo Item Non-Contribution Account

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

[REDACTED] 134.43

**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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

**A. Google**

Mailing Address 1600 Amphitheatre Pkwy

City  
Mountain View

State  
CA

Zip Code  
94043-1351

Purpose of Disbursement

Google Apps

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	3		0	6		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021787**

Amount of Each Disbursement this Period

[REDACTED] 103.92

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

**B. Google**

Mailing Address 1600 Amphitheatre Pkwy

City  
Mountain View

State  
CA

Zip Code  
94043-1351

Purpose of Disbursement

Google Apps

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	3		0	6		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021788**

Amount of Each Disbursement this Period

[REDACTED] 114.00

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

**C. Google**

Mailing Address 1600 Amphitheatre Pkwy

City  
Mountain View

State  
CA

Zip Code  
94043-1351

Purpose of Disbursement

Google Apps

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	3		0	6		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021789**

Amount of Each Disbursement this Period

[REDACTED] 44.07

Memo Item  Non-Contribution Account

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

[REDACTED] 261.99

**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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500021829

Amount of Each Disbursement this Period

[REDACTED] 1.19

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500021830

Amount of Each Disbursement this Period

[REDACTED] 1.22

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500021827

Amount of Each Disbursement this Period

[REDACTED] 4.10

Memo Item Non-Contribution Account

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

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

[REDACTED] 6.51

[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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021826**

Amount of Each Disbursement this Period

[REDACTED] 0.77

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021825**

Amount of Each Disbursement this Period

[REDACTED] 1.22

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021824**

Amount of Each Disbursement this Period

[REDACTED] 2.30

Memo Item  Non-Contribution Account

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

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

[REDACTED] 4.29

[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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	6		2	0	2	3

FEC Identification Number

C [ ]

**Transaction ID : 500021817**

Amount of Each Disbursement this Period

[ ] 1.22

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	6		2	0	2	3

FEC Identification Number

C [ ]

**Transaction ID : 500021818**

Amount of Each Disbursement this Period

[ ] 4.10

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	6		2	0	2	3

FEC Identification Number

C [ ]

**Transaction ID : 500021820**

Amount of Each Disbursement this Period

[ ] 0.87

Memo Item Non-Contribution Account

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

[ ] 6.19

**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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	6		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021821**

Amount of Each Disbursement this Period

[REDACTED] 1.71

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	6		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021823**

Amount of Each Disbursement this Period

[REDACTED] 1.19

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	8		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021819**

Amount of Each Disbursement this Period

[REDACTED] 1.22

Memo Item Non-Contribution Account

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

[REDACTED] 4.12

**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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021822**

Amount of Each Disbursement this Period

[REDACTED] 35.39

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021816**

Amount of Each Disbursement this Period

[REDACTED] 1.71

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

**C. Wix.com**

Mailing Address 235 W 23rd St

City  
New York

State  
NY

Zip Code  
10011-2371

Purpose of Disbursement  
Website Hosting

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500021796**

Amount of Each Disbursement this Period

[REDACTED] 89.04

Memo Item Non-Contribution Account

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

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

[REDACTED] 126.14

[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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500024137

Amount of Each Disbursement this Period

[REDACTED] 1.54

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Blue Cross Blue Shield

Mailing Address 225 N Michigan Ave

City  
Chicago

State  
IL

Zip Code  
60601-7757

Purpose of Disbursement  
Health Insurance

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500022835

Amount of Each Disbursement this Period

[REDACTED] 315.30

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500024135

Amount of Each Disbursement this Period

[REDACTED] 1.23

Memo Item Non-Contribution Account

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

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

[REDACTED] 318.07

[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)

Grid for line numbers 21b-30b with checkboxes, where 29 is checked.

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NAME OF COMMITTEE (In Full)

Veterans for Responsible Leadership

Full Name (Last, First, Middle Initial)

A. Paypal

Mailing Address 2211 N 1st St

City San Jose State CA Zip Code 95131-2021

Purpose of Disbursement Credit Card Processing Fee

Candidate Name

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

Date of Disbursement

Date field: MM/DD/YYYY = 03/27/2023

FEC Identification Number

FEC ID field: C

Transaction ID : 500024136

Amount of Each Disbursement this Period

Amount field: 1.19

Non-Contribution Account Memo Item

Full Name (Last, First, Middle Initial)

B. Mile 22 LLC

Mailing Address 705 E 70th Ter

City Kansas City State MO Zip Code 64131-1322

Purpose of Disbursement Fundraising Consultant

Candidate Name

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

Date of Disbursement

Date field: MM/DD/YYYY = 03/28/2023

FEC Identification Number

FEC ID field: C

Transaction ID : 500022831

Amount of Each Disbursement this Period

Amount field: 1350.00

Non-Contribution Account Memo Item

Full Name (Last, First, Middle Initial)

C. Intuit Inc.

Mailing Address 2700 Coast Ave

City Mountain View State CA Zip Code 94043-1140

Purpose of Disbursement Software

Candidate Name

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

Date of Disbursement

Date field: MM/DD/YYYY = 03/30/2023

FEC Identification Number

FEC ID field: C

Transaction ID : 500022827

Amount of Each Disbursement this Period

Amount field: 85.00

Non-Contribution Account Memo Item

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

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

Subtotal field: 1436.19

Total field: (empty)

# 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500024014

Amount of Each Disbursement this Period

[REDACTED] 1.76

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500024015

Amount of Each Disbursement this Period

[REDACTED] 3.98

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Payroll Data Processing

Mailing Address 4224 Henderson Blvd

City  
Tampa

State  
FL

Zip Code  
33629-5611

Purpose of Disbursement  
Payroll - See Memos

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500022819

Amount of Each Disbursement this Period

[REDACTED] 4757.17

Memo Item Non-Contribution Account

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

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

[REDACTED] 4762.91

[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)

Grid for line numbers: 21b, 22, 23, 26, 27, 28a, 28b, 28c, 29, 30b. Line 29 is checked.

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NAME OF COMMITTEE (In Full)
Veterans for Responsible Leadership

Form A: Disbursement for Abbie Patterson. Date: 03/31/2023. Transaction ID: 500023825. Amount: 4757.17. Memo Item checked.

Form B: Disbursement for Payroll Data Processing. Date: 03/31/2023. Transaction ID: 500024023. Amount: 1970.95. Non-Contribution Account checked.

Form C: Disbursement for Payroll Data Processing. Date: 03/31/2023. Transaction ID: 500024024. Amount: 47.73. Non-Contribution Account checked.

SUBTOTAL of Disbursements This Page (optional) 2018.68
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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

**A. Paragon Payment Solutions**

Mailing Address 2141 E Broadway Rd  
Ste 202

City Tempe State AZ Zip Code 85282-1895

Purpose of Disbursement

Merchant Fees  
Candidate Name

Category/  
Type

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
04		03		2023

FEC Identification Number

C [ ]

Transaction ID : 500028360

Amount of Each Disbursement this Period

[ ] 267.93

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

**B. Google**

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement

Google Apps  
Candidate Name

Category/  
Type

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
04		05		2023

FEC Identification Number

C [ ]

Transaction ID : 500022822

Amount of Each Disbursement this Period

[ ] 108.00

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 2211 N 1st St

City San Jose State CA Zip Code 95131-2021

Purpose of Disbursement

Credit Card Processing Fee  
Candidate Name

Category/  
Type

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
04		09		2023

FEC Identification Number

C [ ]

Transaction ID : 500024063

Amount of Each Disbursement this Period

[ ] 1.22

Memo Item Non-Contribution Account

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

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

[ ] 377.15

[ ]

**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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	9		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500024064**

Amount of Each Disbursement this Period

[REDACTED] 1.19

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	0		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500024065**

Amount of Each Disbursement this Period

[REDACTED] 4.10

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500024080**

Amount of Each Disbursement this Period

[REDACTED] 0.77

Memo Item  Non-Contribution Account

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

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

[REDACTED] 6.06

[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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	2	3

FEC Identification Number

C [ ]

Transaction ID : 500024079

Amount of Each Disbursement this Period

[ ] 1.22

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	2	3

FEC Identification Number

C [ ]

Transaction ID : 500024078

Amount of Each Disbursement this Period

[ ] 1.22

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	2	3

FEC Identification Number

C [ ]

Transaction ID : 500024077

Amount of Each Disbursement this Period

[ ] 0.87

Memo Item Non-Contribution Account

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

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

[ ] 3.31

[ ]

# 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. CommonCentsConsulting LLC

Mailing Address PO Box 26430

City  
Tempe

State  
AZ

Zip Code  
85285-6430

Purpose of Disbursement

Compliance Consulting

Candidate Name

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
0	4			1	8			2	0	2	3		

FEC Identification Number

C [REDACTED]

Transaction ID : 500022811

Amount of Each Disbursement this Period

[REDACTED] 4693.40

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement

Credit Card Processing Fee

Candidate Name

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
0	4			1	8			2	0	2	3		

FEC Identification Number

C [REDACTED]

Transaction ID : 500024066

Amount of Each Disbursement this Period

[REDACTED] 1.22

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement

Credit Card Processing Fee

Candidate Name

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
0	4			2	0			2	0	2	3		

FEC Identification Number

C [REDACTED]

Transaction ID : 500024075

Amount of Each Disbursement this Period

[REDACTED] 1.01

Memo Item Non-Contribution Account

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

[REDACTED] 4695.63

**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)

Grid for line numbers: 21b, 22, 23, 26, 27, 28a, 28b, 28c, 29, 30b. Line 29 is checked.

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NAME OF COMMITTEE (In Full)

Veterans for Responsible Leadership

Full Name (Last, First, Middle Initial)

A. Paypal

Mailing Address 2211 N 1st St

City San Jose State CA Zip Code 95131-2021

Purpose of Disbursement Credit Card Processing Fee

Candidate Name

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

Date of Disbursement

Date selection: 04 / 20 / 2023

FEC Identification Number

FEC ID: C

Transaction ID : 500024076

Amount of Each Disbursement this Period

Amount: 1.71

Non-Contribution Account Memo Item

Full Name (Last, First, Middle Initial)

B. Paypal

Mailing Address 2211 N 1st St

City San Jose State CA Zip Code 95131-2021

Purpose of Disbursement Credit Card Processing Fee

Candidate Name

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

Date of Disbursement

Date selection: 04 / 23 / 2023

FEC Identification Number

FEC ID: C

Transaction ID : 500024074

Amount of Each Disbursement this Period

Amount: 1.54

Non-Contribution Account Memo Item

Full Name (Last, First, Middle Initial)

C. Wix.com

Mailing Address 235 W 23rd St

City New York State NY Zip Code 10011-2371

Purpose of Disbursement Website Hosting

Candidate Name

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

Date of Disbursement

Date selection: 04 / 24 / 2023

FEC Identification Number

FEC ID: C

Transaction ID : 500022829

Amount of Each Disbursement this Period

Amount: 89.04

Non-Contribution Account Memo Item

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

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

Subtotal amount: 92.29

Total amount: 92.29

# 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500024072**

Amount of Each Disbursement this Period

[REDACTED] 1.22

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500024073**

Amount of Each Disbursement this Period

[REDACTED] 1.22

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500024070**

Amount of Each Disbursement this Period

[REDACTED] 1.71

Memo Item Non-Contribution Account

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

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

[REDACTED] 4.15

[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)

Grid for line numbers 21b-30b with checkboxes, where 29 is checked.

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NAME OF COMMITTEE (In Full)
Veterans for Responsible Leadership

Form A: Paypal. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Credit Card Processing Fee), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (04/26/2023), FEC Identification Number, Transaction ID (500024071), and Amount of Each Disbursement (0.86).

Form B: Blue Cross Blue Shield. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Health Insurance), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (04/27/2023), FEC Identification Number, Transaction ID (500022836), and Amount of Each Disbursement (315.30).

Form C: Paypal. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Credit Card Processing Fee), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (04/27/2023), FEC Identification Number, Transaction ID (500024069), and Amount of Each Disbursement (1.19).

SUBTOTAL of Disbursements This Page (optional) 317.35
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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		27		2023

FEC Identification Number

C [REDACTED]

**Transaction ID : 500024081**

Amount of Each Disbursement this Period

[REDACTED]	1.23
------------	------

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Payroll Data Processing

Mailing Address 4224 Henderson Blvd

City  
Tampa

State  
FL

Zip Code  
33629-5611

Purpose of Disbursement  
Payroll - See Memos

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2023

FEC Identification Number

C [REDACTED]

**Transaction ID : 500022818**

Amount of Each Disbursement this Period

[REDACTED]	4757.17
------------	---------

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Estes, Abbie, Patterson, ,

Mailing Address PO Box 996

City  
Fairhope

State  
AL

Zip Code  
36533-0996

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2023

FEC Identification Number

C [REDACTED]

**Transaction ID : 500023826**

Amount of Each Disbursement this Period

[REDACTED]	4797.17
------------	---------

Memo Item  \* Non-Contribution Account

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

[REDACTED]	4758.40
------------	---------

**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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Payroll Data Processing

Mailing Address 4224 Henderson Blvd

City  
Tampa

State  
FL

Zip Code  
33629-5611

Purpose of Disbursement

Payroll Taxes

Candidate Name

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
0	4			3	0			2	0	2	3		

FEC Identification Number

C [REDACTED]

**Transaction ID : 500024104**

Amount of Each Disbursement this Period

[REDACTED] 1970.95

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Payroll Data Processing

Mailing Address 4224 Henderson Blvd

City  
Tampa

State  
FL

Zip Code  
33629-5611

Purpose of Disbursement

Payroll Fee

Candidate Name

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
0	4			3	0			2	0	2	3		

FEC Identification Number

C [REDACTED]

**Transaction ID : 500024105**

Amount of Each Disbursement this Period

[REDACTED] 47.73

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Intuit Inc.

Mailing Address 2700 Coast Ave

City  
Mountain View

State  
CA

Zip Code  
94043-1140

Purpose of Disbursement

Software

Candidate Name

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
0	5			0	1			2	0	2	3		

FEC Identification Number

C [REDACTED]

**Transaction ID : 500022828**

Amount of Each Disbursement this Period

[REDACTED] 85.00

Memo Item  Non-Contribution Account

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

[REDACTED] 2103.68

**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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paragon Payment Solutions

Mailing Address 2141 E Broadway Rd  
Ste 202

City Tempe State AZ Zip Code 85282-1895

Purpose of Disbursement

Merchant Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 02 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : 500022806

Amount of Each Disbursement this Period

[REDACTED] 47.46

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Paypal

Mailing Address 2211 N 1st St

City San Jose State CA Zip Code 95131-2021

Purpose of Disbursement

Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 02 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : 500024068

Amount of Each Disbursement this Period

[REDACTED] 3.30

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Printful, Inc.

Mailing Address 11025 Westlake Dr

City Charlotte State NC Zip Code 28273-3782

Purpose of Disbursement

Printing Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 03 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : 500022837

Amount of Each Disbursement this Period

[REDACTED] 84.83

Memo Item Non-Contribution Account

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

[REDACTED] 135.59

**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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

**A. Title Fight LLC**

Mailing Address 900 Keosauqua Way  
Ste 333

City Des Moines State IA Zip Code 50309-1513

Purpose of Disbursement

Digital Consultant

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 04 / 2023

FEC Identification Number

C [REDACTED]

**Transaction ID : 500022832**

Amount of Each Disbursement this Period

[REDACTED] 2500.00

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 3400 E Sky Harbor Blvd

City Tempe State AZ Zip Code 85284

Purpose of Disbursement

Airfare

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 05 / 2023

FEC Identification Number

C [REDACTED]

**Transaction ID : 500022814**

Amount of Each Disbursement this Period

[REDACTED] 616.80

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

**C. Google**

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement

Google Apps

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 05 / 2023

FEC Identification Number

C [REDACTED]

**Transaction ID : 500022821**

Amount of Each Disbursement this Period

[REDACTED] 108.00

Memo Item Non-Contribution Account

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

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

[REDACTED] 3224.80

[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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

**A. McCauley and Associates**

Mailing Address 420 E South Temple

City  
Salt Lake City

State  
UT

Zip Code  
84111-1319

Purpose of Disbursement

Compliance Consulting

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	2	3

FEC Identification Number

C [ ]

**Transaction ID : 500022813**

Amount of Each Disbursement this Period

[ ] 3166.00

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement

Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	2	3

FEC Identification Number

C [ ]

**Transaction ID : 500024103**

Amount of Each Disbursement this Period

[ ] 0.70

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

**C. CommonCentsConsulting LLC**

Mailing Address PO Box 26430

City  
Tempe

State  
AZ

Zip Code  
85285-6430

Purpose of Disbursement

Compliance Consulting

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	2	3

FEC Identification Number

C [ ]

**Transaction ID : 500022812**

Amount of Each Disbursement this Period

[ ] 1524.86

Memo Item Non-Contribution Account

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

[ ] 4691.56

**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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500024101

Amount of Each Disbursement this Period

[REDACTED] 1.22

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500024102

Amount of Each Disbursement this Period

[REDACTED] 1.19

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	0		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500024100

Amount of Each Disbursement this Period

[REDACTED] 4.10

Memo Item Non-Contribution Account

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

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

[REDACTED] 6.51

[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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	1		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500024099

Amount of Each Disbursement this Period

[REDACTED] 0.77

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500024096

Amount of Each Disbursement this Period

[REDACTED] 9.51

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500024095

Amount of Each Disbursement this Period

[REDACTED] 1.22

Memo Item Non-Contribution Account

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

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

[REDACTED] 11.50

[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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500024094

Amount of Each Disbursement this Period

[REDACTED] 1.22

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500024087

Amount of Each Disbursement this Period

[REDACTED] 9.22

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500024092

Amount of Each Disbursement this Period

[REDACTED] 3.98

Memo Item Non-Contribution Account

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

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

[REDACTED] 14.42

[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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500024098

Amount of Each Disbursement this Period

[REDACTED] 0.87

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	7		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500024088

Amount of Each Disbursement this Period

[REDACTED] 1.76

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500024089

Amount of Each Disbursement this Period

[REDACTED] 1.22

Memo Item Non-Contribution Account

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

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

[REDACTED] 3.85

[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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500024090**

Amount of Each Disbursement this Period

[REDACTED] 1.01

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500024091**

Amount of Each Disbursement this Period

[REDACTED] 1.71

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Wix.com

Mailing Address 235 W 23rd St

City  
New York

State  
NY

Zip Code  
10011-2371

Purpose of Disbursement  
Website Hosting

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500022830**

Amount of Each Disbursement this Period

[REDACTED] 89.04

Memo Item Non-Contribution Account

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

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

[REDACTED] 91.76

[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)

Grid for line numbers: 21b, 22, 23, 26, 27, 28a, 28b, 28c, 29, 30b. Line 29 is checked.

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NAME OF COMMITTEE (In Full)

Veterans for Responsible Leadership

Full Name (Last, First, Middle Initial)

A. Paypal

Mailing Address 2211 N 1st St

City San Jose, State CA, Zip Code 95131-2021

Purpose of Disbursement: Credit Card Processing Fee

Candidate Name

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

Date of Disbursement

Date field: MM/DD/YYYY = 05/23/2023

FEC Identification Number

FEC ID field: C

Transaction ID : 500024097

Amount of Each Disbursement this Period

Amount field: 9.51

Non-Contribution Account Memo Item

Full Name (Last, First, Middle Initial)

B. Paypal

Mailing Address 2211 N 1st St

City San Jose, State CA, Zip Code 95131-2021

Purpose of Disbursement: Credit Card Processing Fee

Candidate Name

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

Date of Disbursement

Date field: MM/DD/YYYY = 05/23/2023

FEC Identification Number

FEC ID field: C

Transaction ID : 500024138

Amount of Each Disbursement this Period

Amount field: 1.54

Non-Contribution Account Memo Item

Full Name (Last, First, Middle Initial)

C. Paypal

Mailing Address 2211 N 1st St

City San Jose, State CA, Zip Code 95131-2021

Purpose of Disbursement: Credit Card Processing Fee

Candidate Name

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

Date of Disbursement

Date field: MM/DD/YYYY = 05/25/2023

FEC Identification Number

FEC ID field: C

Transaction ID : 500024086

Amount of Each Disbursement this Period

Amount field: 1.22

Non-Contribution Account Memo Item

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

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

Subtotal field: 12.27

Total field: (empty)

# 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500024085

Amount of Each Disbursement this Period

[REDACTED] 0.86

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	7		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500024084

Amount of Each Disbursement this Period

[REDACTED] 1.23

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500024082

Amount of Each Disbursement this Period

[REDACTED] 1.22

Memo Item Non-Contribution Account

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

[REDACTED] 3.31

**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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500024083**

Amount of Each Disbursement this Period

[REDACTED] 3.98

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Blue Cross Blue Shield

Mailing Address 225 N Michigan Ave

City  
Chicago

State  
IL

Zip Code  
60601-7757

Purpose of Disbursement  
Health Insurance

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500022834**

Amount of Each Disbursement this Period

[REDACTED] 315.30

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Intuit Inc.

Mailing Address 2700 Coast Ave

City  
Mountain View

State  
CA

Zip Code  
94043-1140

Purpose of Disbursement  
Software

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500022826**

Amount of Each Disbursement this Period

[REDACTED] 85.00

Memo Item Non-Contribution Account

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

[REDACTED] 404.28

**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)

Grid for line numbers: 21b, 22, 23, 26, 27, 28a, 28b, 28c, 29, 30b. Line 29 is checked.

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NAME OF COMMITTEE (In Full)
Veterans for Responsible Leadership

Form A: Payroll Data Processing. Includes fields for Full Name, Mailing Address (4224 Henderson Blvd), City (Tampa), State (FL), Zip Code (33629-5611), Purpose of Disbursement (Payroll - See Memos), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (05/31/2023), FEC Identification Number, Transaction ID (500022816), Amount of Each Disbursement (4757.17), and Memo Item checkbox.

Form B: Estes, Abbie, Patterson, . Includes fields for Full Name, Mailing Address (PO Box 996), City (Fairhope), State (AL), Zip Code (36533-0996), Purpose of Disbursement (Payroll), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (05/31/2023), FEC Identification Number, Transaction ID (500023827), Amount of Each Disbursement (4797.17), and Memo Item checkbox (checked).

Form C: Payroll Data Processing. Includes fields for Full Name, Mailing Address (4224 Henderson Blvd), City (Tampa), State (FL), Zip Code (33629-5611), Purpose of Disbursement (Payroll Taxes), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (05/31/2023), FEC Identification Number, Transaction ID (500024106), Amount of Each Disbursement (1970.95), and Memo Item checkbox.

SUBTOTAL of Disbursements This Page (optional) 6728.12
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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Payroll Data Processing

Mailing Address 4224 Henderson Blvd

City  
Tampa

State  
FL

Zip Code  
33629-5611

Purpose of Disbursement

Payroll Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500024107**

Amount of Each Disbursement this Period

[REDACTED] 47.73

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Title Fight LLC

Mailing Address 900 Keosauqua Way  
Ste 333

City  
Des Moines

State  
IA

Zip Code  
50309-1513

Purpose of Disbursement

Digital Consultant

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500022833**

Amount of Each Disbursement this Period

[REDACTED] 2500.00

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Paragon Payment Solutions

Mailing Address 2141 E Broadway Rd  
Ste 202

City  
Tempe

State  
AZ

Zip Code  
85282-1895

Purpose of Disbursement

Merchant Fees

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500023280**

Amount of Each Disbursement this Period

[REDACTED] 394.96

Memo Item Non-Contribution Account

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

[REDACTED] 2942.69

**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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500024116**

Amount of Each Disbursement this Period

[REDACTED] 4.10

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Google

Mailing Address 1600 Amphitheatre Pkwy

City  
Mountain View

State  
CA

Zip Code  
94043-1351

Purpose of Disbursement  
Google Apps

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500023297**

Amount of Each Disbursement this Period

[REDACTED] 118.44

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Le Meridien Hotel

Mailing Address 120 W 57th St

City  
New York

State  
NY

Zip Code  
10019-3320

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500023285**

Amount of Each Disbursement this Period

[REDACTED] 1110.90

Memo Item  Non-Contribution Account

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

[REDACTED] 1233.44

**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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

**A. Moxy NYC Downtown**

Mailing Address 26 Ann St

City  
New York

State  
NY

Zip Code  
10038-2411

Purpose of Disbursement

Lodging

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	2	3

FEC Identification Number

C [ ]

**Transaction ID : 500024139**

Amount of Each Disbursement this Period

[ ] 835.50

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement

Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	2	3

FEC Identification Number

C [ ]

**Transaction ID : 500024115**

Amount of Each Disbursement this Period

[ ] 0.70

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement

Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	3

FEC Identification Number

C [ ]

**Transaction ID : 500024113**

Amount of Each Disbursement this Period

[ ] 1.22

Memo Item  Non-Contribution Account

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

[ ] 837.42

**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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	3

FEC Identification Number

C [ ]

**Transaction ID : 500024114**

Amount of Each Disbursement this Period

[ ] 1.19

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	2	3

FEC Identification Number

C [ ]

**Transaction ID : 500024112**

Amount of Each Disbursement this Period

[ ] 4.10

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	2	3

FEC Identification Number

C [ ]

**Transaction ID : 500024128**

Amount of Each Disbursement this Period

[ ] 0.77

Memo Item Non-Contribution Account

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

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

[ ] 6.06

[ ]

**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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 3400 E Sky Harbor Blvd

City  
Tempe

State  
AZ

Zip Code  
85284

Purpose of Disbursement

Airfare

Candidate Name

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
0	6			1	2			2	0	2	3		

FEC Identification Number

C [ ]

**Transaction ID : 500023284**

Amount of Each Disbursement this Period

[ ] 30.00

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

**B. Moxy NYC Downtown**

Mailing Address 26 Ann St

City  
New York

State  
NY

Zip Code  
10038-2411

Purpose of Disbursement

Lodging

Candidate Name

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
0	6			1	2			2	0	2	3		

FEC Identification Number

C [ ]

**Transaction ID : 500023286**

Amount of Each Disbursement this Period

[ ] 912.99

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

**C. Moxy NYC Downtown**

Mailing Address 26 Ann St

City  
New York

State  
NY

Zip Code  
10038-2411

Purpose of Disbursement

Lodging

Candidate Name

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
0	6			1	2			2	0	2	3		

FEC Identification Number

C [ ]

**Transaction ID : 500023287**

Amount of Each Disbursement this Period

[ ] 6.53

Memo Item  Non-Contribution Account

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

[ ] 949.52

**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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

**A. Moxy NYC Downtown**

Mailing Address 26 Ann St

City  
New York

State  
NY

Zip Code  
10038-2411

Purpose of Disbursement

Lodging

Candidate Name

Category/  
Type

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
0	6			1	2			2	0	2	3		

FEC Identification Number

C

**Transaction ID : 500023288**

Amount of Each Disbursement this Period

6	4	7	.	3	1
---	---	---	---	---	---

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

**B. Moxy NYC Downtown**

Mailing Address 26 Ann St

City  
New York

State  
NY

Zip Code  
10038-2411

Purpose of Disbursement

Lodging

Candidate Name

Category/  
Type

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
0	6			1	2			2	0	2	3		

FEC Identification Number

C

**Transaction ID : 500023289**

Amount of Each Disbursement this Period

7	4	3	.	9	3
---	---	---	---	---	---

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

**C. Moxy NYC Downtown**

Mailing Address 26 Ann St

City  
New York

State  
NY

Zip Code  
10038-2411

Purpose of Disbursement

Lodging

Candidate Name

Category/  
Type

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
0	6			1	2			2	0	2	3		

FEC Identification Number

C

**Transaction ID : 500023290**

Amount of Each Disbursement this Period

0	.	0	1
---	---	---	---

Memo Item  Non-Contribution Account

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

1	3	9	.	1	3	2	5
---	---	---	---	---	---	---	---

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

1	3	9	.	1	3	2	5
---	---	---	---	---	---	---	---

**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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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	4		2	0	2	3

FEC Identification Number

C [ ]

**Transaction ID : 500024127**

Amount of Each Disbursement this Period

[ ] 1.22

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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	5		2	0	2	3

FEC Identification Number

C [ ]

**Transaction ID : 500024126**

Amount of Each Disbursement this Period

[ ] 1.22

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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	6		2	0	2	3

FEC Identification Number

C [ ]

**Transaction ID : 500024125**

Amount of Each Disbursement this Period

[ ] 0.87

Memo Item  Non-Contribution Account

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

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

[ ] 3.31

[ ]

# 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500024124

Amount of Each Disbursement this Period

[REDACTED] 1.22

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500024122

Amount of Each Disbursement this Period

[REDACTED] 1.01

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : 500024123

Amount of Each Disbursement this Period

[REDACTED] 1.71

Memo Item Non-Contribution Account

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

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

[REDACTED] 3.94

[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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

**A. Wix.com**

Mailing Address 235 W 23rd St

City  
New York

State  
NY

Zip Code  
10011-2371

Purpose of Disbursement

Website Hosting

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		2	0		2	0	2	3

FEC Identification Number

C [ ]

**Transaction ID : 500023302**

Amount of Each Disbursement this Period

[ ] 89.04

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement

Credit Card Processing Fee

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		2	3		2	0	2	3

FEC Identification Number

C [ ]

**Transaction ID : 500024121**

Amount of Each Disbursement this Period

[ ] 1.54

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement

Credit Card Processing Fee

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		2	5		2	0	2	3

FEC Identification Number

C [ ]

**Transaction ID : 500024120**

Amount of Each Disbursement this Period

[ ] 1.22

Memo Item  Non-Contribution Account

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

[ ] 91.80

**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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500024119**

Amount of Each Disbursement this Period

[REDACTED] 0.86

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Blue Cross Blue Shield

Mailing Address 225 N Michigan Ave

City  
Chicago

State  
IL

Zip Code  
60601-7757

Purpose of Disbursement  
Health Insurance

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500023303**

Amount of Each Disbursement this Period

[REDACTED] 315.30

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. McCauley and Associates

Mailing Address 420 E South Temple

City  
Salt Lake City

State  
UT

Zip Code  
84111-1319

Purpose of Disbursement  
Compliance Consulting

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500023283**

Amount of Each Disbursement this Period

[REDACTED] 3166.00

Memo Item Non-Contribution Account

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

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

[REDACTED] 3482.16

[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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 2211 N 1st St

City  
San Jose

State  
CA

Zip Code  
95131-2021

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500024118**

Amount of Each Disbursement this Period

[REDACTED] 1.23

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

### B. Estes, Abbie, Patterson, ,

Mailing Address PO Box 996

City  
Fairhope

State  
AL

Zip Code  
36533-0996

Purpose of Disbursement  
Reimbursed Travel Expenses - See Memos if Itemized

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500023829**

Amount of Each Disbursement this Period

[REDACTED] 254.95

Memo Item  Non-Contribution Account

Full Name (Last, First, Middle Initial)

### C. American Airlines

Mailing Address 3400 E Sky Harbor Blvd

City  
Tempe

State  
AZ

Zip Code  
85284

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : 500023833**

Amount of Each Disbursement this Period

[REDACTED] 30.00

Memo Item  \* Non-Contribution Account

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

[REDACTED] 256.18

**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 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)

**Veterans for Responsible Leadership**

Full Name (Last, First, Middle Initial)

**A. Intuit Inc.**

Mailing Address 2700 Coast Ave

City Mountain View

State CA

Zip Code 94043-1140

Purpose of Disbursement

Software

Candidate Name

Category/Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2023

FEC Identification Number

C [REDACTED]

**Transaction ID : 500023300**

Amount of Each Disbursement this Period

[REDACTED] 85.00

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 2211 N 1st St

City San Jose

State CA

Zip Code 95131-2021

Purpose of Disbursement

Credit Card Processing Fee

Candidate Name

Category/Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2023

FEC Identification Number

C [REDACTED]

**Transaction ID : 500024117**

Amount of Each Disbursement this Period

[REDACTED] 3.98

Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

**C. Payroll Data Processing**

Mailing Address 4224 Henderson Blvd

City Tampa

State FL

Zip Code 33629-5611

Purpose of Disbursement

Payroll - See Memos

Candidate Name

Category/Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2023

FEC Identification Number

C [REDACTED]

**Transaction ID : 500023295**

Amount of Each Disbursement this Period

[REDACTED] 4765.17

Memo Item Non-Contribution Account

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

[REDACTED] 4854.15

**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)

Grid for line numbers: 21b, 22, 23, 26, 27, 28a, 28b, 28c, 29, 30b. Line 29 is checked.

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NAME OF COMMITTEE (In Full)

Veterans for Responsible Leadership

Full Name (Last, First, Middle Initial)

A. Estes, Abbie, Patterson, ,

Mailing Address PO Box 996

City Fairhope

State AL

Zip Code 36533-0996

Purpose of Disbursement

Payroll

Candidate Name

Office Sought: House, Senate, President

Disbursement For: Primary, General, Other (specify)

State: District:

Date of Disbursement

Date: 06 / 30 / 2023

FEC Identification Number

C [Redacted]

Transaction ID : 500023828

Amount of Each Disbursement this Period

4765.17

Memo Item \* Non-Contribution Account

Full Name (Last, First, Middle Initial)

B. Payroll Data Processing

Mailing Address 4224 Henderson Blvd

City Tampa

State FL

Zip Code 33629-5611

Purpose of Disbursement

Payroll Taxes

Candidate Name

Office Sought: House, Senate, President

Disbursement For: Primary, General, Other (specify)

State: District:

Date of Disbursement

Date: 06 / 30 / 2023

FEC Identification Number

C [Redacted]

Transaction ID : 500024129

Amount of Each Disbursement this Period

1962.95

Non-Contribution Account Memo Item

Full Name (Last, First, Middle Initial)

C. Payroll Data Processing

Mailing Address 4224 Henderson Blvd

City Tampa

State FL

Zip Code 33629-5611

Purpose of Disbursement

Payroll Fee

Candidate Name

Office Sought: House, Senate, President

Disbursement For: Primary, General, Other (specify)

State: District:

Date of Disbursement

Date: 06 / 30 / 2023

FEC Identification Number

C [Redacted]

Transaction ID : 500024130

Amount of Each Disbursement this Period

47.73

Non-Contribution Account Memo Item

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

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

2010.68

71248.24