

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

DEFENDING AMERICA'S VALUES EVERYWHERE (TEAM DAVE)

ADDRESS (number and street)

PO Box 30844

Check if different  
than previously  
reported. (ACC)

Bethesda

MD

20824

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00497594

3. IS THIS  
REPORTNEW  
(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

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

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

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

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
07 01 2019

through

M M M / D D D / Y Y Y Y Y Y  
12 31 2019

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

Giramberk, Valerie, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Giramberk, Valerie, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
01 31 2020

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

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

DEFENDING AMERICA'S VALUES EVERYWHERE (TEAM DAVE)

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
07 / 01 / 2019 To: M M / D D / Y Y Y Y Y Y  
12 / 31 / 2019

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2019</span>		<span style="border: 1px solid black; padding: 2px;">6549.61</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">622.70</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">27500.00</span>	<span style="border: 1px solid black; padding: 2px;">27500.00</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">28122.70</span>	<span style="border: 1px solid black; padding: 2px;">34049.61</span>
7. Total Disbursements (from Line 31).....	<span style="border: 1px solid black; padding: 2px;">9713.51</span>	<span style="border: 1px solid black; padding: 2px;">15640.42</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<span style="border: 1px solid black; padding: 2px;">18409.19</span>	<span style="border: 1px solid black; padding: 2px;">18409.19</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">1450.00</span>	

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

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

DEFENDING AMERICA'S VALUES EVERYWHERE (TEAM DAVE)

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	9

To:

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

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).....	10000.00	10000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	10000.00	10000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	17500.00	17500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	27500.00	27500.00
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).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	27500.00	27500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	27500.00	27500.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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 .....	9713.51	15640.42
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	9713.51	15640.42
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).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	9713.51	15640.42
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9713.51	15640.42

**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) .....	27500.00	27500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	27500.00	27500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	9713.51	15640.42
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	9713.51	15640.42

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

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

FOR LINE NUMBER: PAGE 6 OF 19  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

**DEFENDING AMERICA'S VALUES EVERYWHERE (TEAM DAVE)**

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

**A. Winn, Gregory, , ,**

Mailing Address 6677 East Indian Bend Road

City  
Paradise Valley

State  
AZ

Zip Code  
85253

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 05 / 2019

Transaction ID : SA11AI.5394

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**B. Winn-Radcliff, Mary, M., ,**

Mailing Address 6677 E Indian Bend Rd

City  
Paradise Valley

State  
AZ

Zip Code  
85253

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Homemaker

Occupation (for Individual)  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 05 / 2019

Transaction ID : SA11AI.5392

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

10000.00

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

10000.00

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

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

FOR LINE NUMBER: PAGE 7 OF 19  
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**DEFENDING AMERICA'S VALUES EVERYWHERE (TEAM DAVE)**

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

## **A. ALLERGAN, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 5 GIRALDA FARMS

City  
MADISON

State  
NJ

Zip Code  
07940

FEC ID number of contributing  
federal political committee.

C

C00391086

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 18 / 2019

Transaction ID : SA11C.5349

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

## **B. AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)**

Mailing Address 208 S. AKARD STREET  
SUITE 2701

City  
DALLAS

State  
TX

Zip Code  
75202

FEC ID number of contributing  
federal political committee.

C

C00109017

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 22 / 2019

Transaction ID : SA11C.5389

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

## **C. CVS HEALTH PAC**

Mailing Address 1275 PENNSYLVANIA AVENUE, NW  
SUITE 700

City  
WASHINGTON

State  
DC

Zip Code  
20004

FEC ID number of contributing  
federal political committee.

C

C00384818

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 24 / 2019

Transaction ID : SA11C.5356

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

12500.00

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

# **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 19

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**DEFENDING AMERICA'S VALUES EVERYWHERE (TEAM DAVE)**

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

**A. National Association of Real Estate Investment Trusts, Inc. PAC**

Mailing Address 1875 I Street NW  
Suite 600

City  
Washington

State  
DC

Zip Code  
20006

FEC ID number of contributing  
federal political committee.

**C** C00303339

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**11** / **25** / **2019**

**Transaction ID : SA11C.5390**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**B. National Association of Real Estate Investment Trusts, Inc. PAC**

Mailing Address 1875 I Street NW  
Suite 600

City  
Washington

State  
DC

Zip Code  
20006

FEC ID number of contributing  
federal political committee.

**C** C00303339

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**12** / **31** / **2019**

**Transaction ID : SA11C.5395**

Amount of Each Receipt this Period

4000.00

☐ Memo Item

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

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

5000.00

17500.00



<b>X</b>	21b		22		23		26		27
	28a		28b		28c		29		30b

## DEFENDING AMERICA'S VALUES EVERYWHERE (TEAM DAVE)

Three digital displays showing the date 10/17/2019 in MM/DD/YYYY format. The first display shows '10' with 'M' indicators above it. The second display shows '17' with 'D' indicators above it. The third display shows '2019' with 'Y' indicators above it.

C

300.00

Memo Item

C

300.00

Memo Item

MM / DD / YYYY  
10 / 17 / 2019

C

300.00

Memo Item

900.00

[illegible]

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 19

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

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NAME OF COMMITTEE (In Full)

**DEFENDING AMERICA'S VALUES EVERYWHERE (TEAM DAVE)**

Full Name (Last, First, Middle Initial)

**A. Campaign Financial Services**

Mailing Address PO Box 30844

City  
BethesdaState  
MDZip Code  
20824Purpose of Disbursement  
PAC Compliance Consulting

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	7			2	0	1	9		

FEC Identification Number

C

**Transaction ID : SB21B.5382**

Amount of Each Disbursement this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Campaign Financial Services**

Mailing Address PO Box 30844

City  
BethesdaState  
MDZip Code  
20824Purpose of Disbursement  
PAC Compliance Consulting

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	7			2	0	1	9		

FEC Identification Number

C

**Transaction ID : SB21B.5383**

Amount of Each Disbursement this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Campaign Financial Services**

Mailing Address PO Box 30844

City  
BethesdaState  
MDZip Code  
20824Purpose of Disbursement  
PAC Compliance Consulting

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	7			2	0	1	9		

FEC Identification Number

C

**Transaction ID : SB21B.5385**

Amount of Each Disbursement this Period

300.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

900.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 19

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

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NAME OF COMMITTEE (In Full)

**DEFENDING AMERICA'S VALUES EVERYWHERE (TEAM DAVE)**

Full Name (Last, First, Middle Initial)

**A. Campaign Financial Services**

Mailing Address PO Box 30844

City  
BethesdaState  
MDZip Code  
20824Purpose of Disbursement  
PAC Compliance Consulting

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	7			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.5386**

Amount of Each Disbursement this Period

 900.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Campaign Financial Services**

Mailing Address PO Box 30844

City  
BethesdaState  
MDZip Code  
20824Purpose of Disbursement  
PAC Compliance Consulting

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	7			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.5406**

Amount of Each Disbursement this Period

 300.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Campaign Financial Services**

Mailing Address PO Box 30844

City  
BethesdaState  
MDZip Code  
20824Purpose of Disbursement  
PAC Compliance Consulting

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	8			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.5387**

Amount of Each Disbursement this Period

 300.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 1500.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 19

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

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NAME OF COMMITTEE (In Full)

**DEFENDING AMERICA'S VALUES EVERYWHERE (TEAM DAVE)**

Full Name (Last, First, Middle Initial)

**A. Dimenstein, Kat, , ,**

Mailing Address 3610 18th Street NE

City  
WashingtonState  
DCZip Code  
20018Purpose of Disbursement  
SEE MEMO ITEMS

001

Category/  
Type

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	9				3	0		2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.5359

Amount of Each Disbursement this Period

163.81

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. East Valley Web and Graphic**

Mailing Address 726 N. Cambridge Street

City  
GilbertState  
AZZip Code  
85233Purpose of Disbursement  
PAC Printing

001

Category/  
Type

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	9				1	7		2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.5354

Amount of Each Disbursement this Period

160.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Enchantment Resort**

Mailing Address 525 Boynton Canyon Road

City  
SedonaState  
AZZip Code  
86336Purpose of Disbursement  
PAC Meal Expense

001

Category/  
Type

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	9				3	0		2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.5370

Amount of Each Disbursement this Period

24.80

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

323.81

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DEFENDING AMERICA'S VALUES EVERYWHERE (TEAM DAVE)**

Full Name (Last, First, Middle Initial)

**A. Five Below**

Mailing Address 4523 E Thomas Rd

City  
PhoenixState  
AZZip Code  
85018Purpose of Disbursement  
PAC Meal Expense

001

Category/  
Type

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	9				3	0				2	0	1	9

FEC Identification Number

C

Transaction ID : SB21B.5372

Amount of Each Disbursement this Period

1.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Hudson News**

Mailing Address 7050 Friendship Rd Concourse E

City  
BaltimoreState  
MDZip Code  
21240Purpose of Disbursement  
PAC Meal Expense

001

Category/  
Type

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	9				3	0				2	0	1	9

FEC Identification Number

C

Transaction ID : SB21B.5363

Amount of Each Disbursement this Period

8.48

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Original ChopShop**

Mailing Address 4503 N 32nd St

City  
PhoenixState  
AZZip Code  
85016Purpose of Disbursement  
PAC Meal Expense

001

Category/  
Type

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	9				3	0				2	0	1	9

FEC Identification Number

C

Transaction ID : SB21B.5360

Amount of Each Disbursement this Period

20.09

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DEFENDING AMERICA'S VALUES EVERYWHERE (TEAM DAVE)**

Full Name (Last, First, Middle Initial)

**A. Roskam, Elizabeth, , ,**

Mailing Address 141 Shelley Lane

City  
WheatonState  
ILZip Code  
60189Purpose of Disbursement  
PAC Supporter Gifts

006

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		24		2019

FEC Identification Number

**C****Transaction ID : SB21B.5351**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Shell**

Mailing Address 1515 E Buckeye Rd

City  
PhoenixState  
AZZip Code  
85034Purpose of Disbursement  
PAC Fuel

002

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2019

FEC Identification Number

**C****Transaction ID : SB21B.5368**

Amount of Each Disbursement this Period

31.38

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Starbucks**

Mailing Address Kansas City International Airport

City  
Kansas CityState  
MOZip Code  
64153Purpose of Disbursement  
PAC Meal Expense

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2019

FEC Identification Number

**C****Transaction ID : SB21B.5362**

Amount of Each Disbursement this Period

7.59

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

5000.00

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

<b>X</b>	21b		22		23		26		27
	28a		28b		28c		29		30b

## DEFENDING AMERICA'S VALUES EVERYWHERE (TEAM DAVE)

69.48

MM / DD / YYYY

1000.00

C

Amount of Each Disbursement this Period

1000.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 16 OF 19

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**DEFENDING AMERICA'S VALUES EVERYWHERE (TEAM DAVE)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Campaign, Financial Services, , ,**

Nature of Debt (Purpose):

PAC Compliance Consulting

Mailing Address PO Box 30844

City

Bethesda

State

MD

Zip Code

20824

Outstanding Balance Beginning This Period

300.00

Transaction ID : SD10.5341

Amount Incurred This Period

0.00

Payment This Period

300.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Campaign, Financial Services, , ,**

Nature of Debt (Purpose):

PAC Compliance Consulting

Mailing Address PO Box 30844

City

Bethesda

State

MD

Zip Code

20824

Outstanding Balance Beginning This Period

300.00

Transaction ID : SD10.5342

Amount Incurred This Period

0.00

Payment This Period

300.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Campaign, Financial Services, , ,**

Nature of Debt (Purpose):

PAC Compliance Consulting

Mailing Address PO Box 30844

City

Bethesda

State

MD

Zip Code

20824

Outstanding Balance Beginning This Period

300.00

Transaction ID : SD10.5343

Amount Incurred This Period

0.00

Payment This Period

300.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►



**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 17 OF 19

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**DEFENDING AMERICA'S VALUES EVERYWHERE (TEAM DAVE)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Campaign, Financial Services, , ,**

Nature of Debt (Purpose):

PAC Compliance Consulting

Mailing Address PO Box 30844

City

Bethesda

State

MD

Zip Code

20824

Outstanding Balance Beginning This Period

300.00

Transaction ID : SD10.5345

Amount Incurred This Period

0.00

Payment This Period

300.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Campaign, Financial Services, , ,**

Nature of Debt (Purpose):

PAC Compliance Consulting

Mailing Address PO Box 30844

City

Bethesda

State

MD

Zip Code

20824

Outstanding Balance Beginning This Period

300.00

Transaction ID : SD10.5344

Amount Incurred This Period

0.00

Payment This Period

300.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Campaign, Financial Services, , ,**

Nature of Debt (Purpose):

PAC Compliance Consulting

Mailing Address PO Box 30844

City

Bethesda

State

MD

Zip Code

20824

Outstanding Balance Beginning This Period

300.00

Transaction ID : SD10.5346

Amount Incurred This Period

0.00

Payment This Period

300.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 18 OF 19

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**DEFENDING AMERICA'S VALUES EVERYWHERE (TEAM DAVE)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Campaign, Financial Services, , ,**

Nature of Debt (Purpose):

PAC Compliance Consulting

Mailing Address PO Box 30844

City

Bethesda

State

MD

Zip Code

20824

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5403

Amount Incurred This Period

300.00

Payment This Period

300.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Campaign Financial Services**

Nature of Debt (Purpose):

PAC Compliance Consulting

Mailing Address PO Box 30844

City

Bethesda

State

MD

Zip Code

20824

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5399

Amount Incurred This Period

600.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

600.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Gula Graham**

Nature of Debt (Purpose):

PAC Fundraising Consulting

Mailing Address 499 S. Capitol Street SW  
Suite 420

City

Washington

State

DC

Zip Code

20003

Outstanding Balance Beginning This Period

100.00

Transaction ID : SD10.5347

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

100.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

700.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 19 OF 19

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**DEFENDING AMERICA'S VALUES EVERYWHERE (TEAM DAVE)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Gula Graham**

Nature of Debt (Purpose):

PAC Fundraising Consulting

Mailing Address 499 S. Capitol Street SW  
Suite 420City  
WashingtonState  
DCZip Code  
20003

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5398

Amount Incurred This Period

750.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

750.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

750.00

2) **TOTALS** This Period (last page this line number only)..... ►

1450.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

1450.00