

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**
STARS AND STRIPES FOREVER PAC

ADDRESS (number and street) **228 S WASHINGTON STREET**
SUITE 115
 Check if different than previously reported. (ACC) **ALEXANDRIA VA 22314**

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

C **C00635243** 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 **12 / 12 / 2017** in the State of **AL**
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period **07 / 11 / 2017** through **11 / 22 / 2017**

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
SATTERFIELD, DAVID, , ,
Type or Print Name of Treasurer _____

Signature of Treasurer **SATTERFIELD, DAVID, , ,** [Electronically Filed] Date **11 / 30 / 2017**

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

STARS AND STRIPES FOREVER PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="77327.88"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="253212.23"/>	<input type="text" value="654725.62"/>
(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="330540.11"/>	<input type="text" value="654725.62"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="278484.42"/>	<input type="text" value="602669.93"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="52055.69"/>	<input type="text" value="52055.69"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="14728.28"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

STARS AND STRIPES FOREVER PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	108758.51	218802.35
(ii) Unitemized	95631.26	185048.57
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	204389.77	403850.92
(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)	204389.77	403850.92
12. Transfers From Affiliated/Other Party Committees.....	0.00	171790.85
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.).....	48822.46	79083.85
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)).....▶	253212.23	654725.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	253212.23	654725.62

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	210613.12	451363.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	210613.12	451363.59
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)	67871.30	150806.34
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	500.00
(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	500.00
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)) ..	278484.42	602669.93
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	278484.42	602669.93

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	204389.77	403850.92
34. Total Contribution Refunds (from Line 28(d))	0.00	500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	204389.77	403350.92
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	210613.12	451363.59
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	210613.12	451363.59

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. GEARHART, MARILYN, V, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 427
 City WATERVILLE State WA Zip Code 98858
 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 ▼ 2000.00

Date of Receipt 07 / 11 / 2017
Transaction ID : A3F253AF366404F59947
 Amount of Each Receipt this Period 2000.00
 Memo Item

B. BURIANEK, BRUCE, L, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3010 QUINCANNON LN
 City HOUSTON State TX Zip Code 77043-1201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 11 / 2017
Transaction ID : AC1A6B488D6F64CCEB67
 Amount of Each Receipt this Period 250.00
 Memo Item

C. ALTON, DUANE, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 712 N LANCASHIRE LN
 City LIBERTY LAKE State WA Zip Code 99019-8531
 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 ▼ 1550.00

Date of Receipt 07 / 11 / 2017
Transaction ID : AC7FBE4F60D1D465B91A
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 256
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. HUNTER, JAMES, S, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19330 BEAUFAIN ST
 City CORNELIUS State NC Zip Code 28031-5531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 11 / 2017
Transaction ID : A803D9CAA6AEF4E3AA98
 Amount of Each Receipt this Period 300.00
 Memo Item

B. LASLEY, PAUL, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7024 GLEN ARBOR DR
 City FLORENCE State KY Zip Code 41042
 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 ▼ 4000.00

Date of Receipt 07 / 11 / 2017
Transaction ID : A1B163F7A79AE49D8869
 Amount of Each Receipt this Period 4000.00
 Memo Item

C. DAVIS, LESTER, W, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14228 W CABALLERO DR
 City SUN CITY WEST State AZ Zip Code 85375-2271
 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 ▼ 230.64

Date of Receipt 07 / 11 / 2017
Transaction ID : A70EDF841B68149E1A75
 Amount of Each Receipt this Period 20.16
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	4320.16
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 256
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. TEAL, TRACY, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 E 9TH AVE
 City JOHNSON CITY State TN Zip Code 37601-3907
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 13 / 2017
Transaction ID : A6466A73C92764B2F9A2
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. TAYLOR, WILFORD, , MR, III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 898
 City CANYON State TX Zip Code 79015-0898
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2017
Transaction ID : AE841DC0D61E74FAF80D
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. ORR, MARVIN, E, MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8979 JENNA RD
 City GERMANTOWN State TN Zip Code 38138
 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 ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2017
Transaction ID : A941842540B5D45FEA61
 Amount of Each Receipt this Period
 375.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	575.00
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 9 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. DHANSE, CATHERINE, A, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 DONNAN AVE
 APT E9
 City WASHINGTON State PA Zip Code 15301-6558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINK CHERO & REHAB Occupation (for Individual) CHIRO ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 07 / 14 / 2017
Transaction ID : A501D2CB597854C7EB5A
 Amount of Each Receipt this Period 25.00
 Memo Item

B. GUILLAUDEU, LOUISE, L, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1414 S DOVER WAY
 City LAKEWOOD State CO Zip Code 80232-5253
 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 ▼ 225.00

Date of Receipt 07 / 15 / 2017
Transaction ID : A9FE6B13DDAE44A6FBB7
 Amount of Each Receipt this Period 25.00
 Memo Item

C. FRIEDRICH, JOSEPH, H, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8045 ADAM CT
 City GRANITE BAY State CA Zip Code 95746-9588
 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 ▼ 275.00

Date of Receipt 07 / 16 / 2017
Transaction ID : A5BA9D69D13BD402EA6D
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. CRAMER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2817 S LIPSCOMB ST
 City AMARILLO State TX Zip Code 79109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AUSTIN HOSE Occupation (for Individual) BUS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 17 / 2017
Transaction ID : A495C856485CA46A1A92
 Amount of Each Receipt this Period 500.00
 Memo Item

B. HEINER, CLYDE, M, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 388 QUAIL RUN RD
 City FARMINGTON State UT Zip Code 84025-3819
 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 ▼ 2500.00

Date of Receipt 07 / 17 / 2017
Transaction ID : A1464DEB2CAEB4751B5C
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. PEARSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 62 MIDDLE DUNSTABLE RD
 City NASHUA State NH Zip Code 03062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 17 / 2017
Transaction ID : A311A13687B8A426AA14
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 256
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. HUBBELL, DOROTHY, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 GRANDMA'S PATH
 City CANDLER State NC Zip Code 28715
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 18 / 2017
Transaction ID : A835369FOC4EF4253A57
 Amount of Each Receipt this Period 100.00
 Memo Item

B. ALLEN, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1522 LAKE SHORE DR
 City LONG BEACH State IN Zip Code 46360-1456
 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 ▼ 850.16

Date of Receipt 07 / 19 / 2017
Transaction ID : AE3310F5D9FC34379B42
 Amount of Each Receipt this Period 125.00
 Memo Item

C. MAHONEY, EDWARD, A, MR, III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8445 FOXGLOVE AVE NW
 City CLINTON State OH Zip Code 44216-9502
 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 ▼ 1400.00

Date of Receipt 07 / 19 / 2017
Transaction ID : A3A6D9E05EFDF48A79EB
 Amount of Each Receipt this Period 700.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	925.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. WOLGEMUTH, DONALD, H, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3001 LITITZ PIKE
PO BOX 5093

City LANCASTER State PA Zip Code 17606-5093

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 ▼
300.00

Date of Receipt
07 / 19 / 2017
Transaction ID : ACEA3CFF02DA940FBA8E

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 13048 FARM TO MARKET RD

City MOUNT VERNON State WA Zip Code 98273

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
07 / 21 / 2017
Transaction ID : AF3D78E71DA27404A904

Amount of Each Receipt this Period
250.00

Memo Item

C. KRICK, DONALD, H, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 840 STONEY CREEK DR
APT A

City DAUPHIN State PA Zip Code 17018-9649

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 ▼
600.00

Date of Receipt
07 / 21 / 2017
Transaction ID : AEB8F6A0015C144ACA43

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 256
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. SMITH, S, LEE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1154 HARVEST GLEN DR NW
 City CLEVELAND State TN Zip Code 37312-6361
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U S POSTAL SERVICE Occupation (for Individual) CUSTODIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 07 / 21 / 2017
Transaction ID : A5DEC700AF8AD432F997
 Amount of Each Receipt this Period 50.00
 Memo Item

B. JEMIOLA, JAMES, MICHAEL, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2016 GRANT AVE APT B
 City REDONDO BEACH State CA Zip Code 90278
 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 ▼ 1000.00

Date of Receipt 07 / 21 / 2017
Transaction ID : AC63E14DB417949F4870
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. EYESTONE, MAYNARD, M, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2803 E WINGER RD
 City MEAD State WA Zip Code 99021
 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 ▼ 280.00

Date of Receipt 07 / 22 / 2017
Transaction ID : A6FDC9148A8FF43B996D
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1070.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. MELCHING, DONALD, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1875 RANCHO TUJUNGA DR
 City COVINA State CA Zip Code 91724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LORDON ENTERPRISES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 24 / 2017
Transaction ID : A5E9245784AC44D4384A
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. HEIDE, CHARLES, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5825 6TH PL
 City KENOSHA State WI Zip Code 53144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 24 / 2017
Transaction ID : A52FB4FD9A4794DF3930
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. CRAIGHEAD, LINCOLN, W, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 175 BARLOW RD
 City FAIRFIELD State CT Zip Code 06824-3864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2017
Transaction ID : AA925573B99EE4695836
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 OF 256
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. BLOOMFIELD, JANET, A, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3878 MUSGROVE RD
 City CHILLICOTHE State OH Zip Code 45601-9777
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL ELECTRIC RET Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 395.00

Date of Receipt 07 / 25 / 2017
Transaction ID : AD7E476139D704A0FB
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GALLARDO, THOMAS, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13131 HONEYBEE ST
 City MOORPARK State CA Zip Code 93021-2133
 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 ▼ 225.00

Date of Receipt 07 / 25 / 2017
Transaction ID : AF604654B2DC741F59ED
 Amount of Each Receipt this Period 25.00
 Memo Item

C. SHEPHERD, BARRY, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2670 60TH AVE SE
 City ROCHESTER State MN Zip Code 55904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IBM Occupation (for Individual) ELECT ENG
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 01 / 2017
Transaction ID : A238A4CA05EC5446EB07
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 OF 256
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. SEMLER, SHIRLEY, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1053 CHAMBERS RD
 City HORSEHEADS State NY Zip Code 14845-8948
 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 ▼ 300.00

Date of Receipt 08 / 01 / 2017
Transaction ID : AA80A44686DC14B72A11
 Amount of Each Receipt this Period 100.00
 Memo Item

B. FOSTER, ROBERT, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 17TH ST
 City BEDFORD State IN Zip Code 47421
 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 ▼ 300.00

Date of Receipt 08 / 02 / 2017
Transaction ID : AD3DD50E7B21A4687B90
 Amount of Each Receipt this Period 300.00
 Memo Item

C. HAYDEN, MARILYN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10306 E CALLE DE LAS BRISAS
 City SCOTTSDALE State AZ Zip Code 85255-3762
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 03 / 2017
Transaction ID : A4ADAF0A2D5E46F69FB
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. DHANSE, CATHERINE, A, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 DONNAN AVE
 APT E9
 City WASHINGTON State PA Zip Code 15301-6558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINK CHERO & REHAB Occupation (for Individual) CHIRO ASSISTANT
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 281.00

Date of Receipt 08 / 03 / 2017
Transaction ID : ABD44897397834EFBB39
 Amount of Each Receipt this Period 30.00
 Memo Item

B. CARUSO, JOEY, W, MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2521 METAIRIE HEIGHTS AVE
 City METAIRIE State LA Zip Code 70002
 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 205.16

Date of Receipt 08 / 04 / 2017
Transaction ID : ACCDCF5B67BDF4B369C3
 Amount of Each Receipt this Period 25.00
 Memo Item

C. COX, PHILIP, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4917 TENNESSEE AVE
 City CHATTANOOGA State TN Zip Code 37409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 08 / 05 / 2017
Transaction ID : AEE69B409EEC147B991F
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 256
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. VEENSTRA, JOANN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15863 SEXTON RD

City ESCALON	State CA	Zip Code 95320-9763
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1650.00

Date of Receipt
 08 / 07 / 2017
Transaction ID : A00AC8D60475B4FAF86D

Amount of Each Receipt this Period
800.00

Memo Item

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

Mailing Address 712 N LANCASHIRE LN

City LIBERTY LAKE	State WA	Zip Code 99019-8531
----------------------	-------------	------------------------

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 ▼
1800.00

Date of Receipt
 08 / 07 / 2017
Transaction ID : A21A1F767F9D4461AA60

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 2950 KILLMORE RD

City ELLENSBURG	State WA	Zip Code 98926
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 08 / 07 / 2017
Transaction ID : A8238FEE956A0421DB16

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. HAYDEN, MARILYN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10306 E CALLE DE LAS BRISAS
 City SCOTTSDALE State AZ Zip Code 85255-3762
 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 ▼ 700.00

Date of Receipt 08 / 07 / 2017
Transaction ID : AEB44F85E306E47B4A90
 Amount of Each Receipt this Period 200.00
 Memo Item

B. WOODRIF, PERS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 503
 City SOMERSET State VA Zip Code 22972
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 07 / 2017
Transaction ID : A91832999792E4E20B27
 Amount of Each Receipt this Period 100.00
 Memo Item

C. DERR, BEVERLEY, G, MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 BITLER RD
 City MILLVILLE State PA Zip Code 17846-9265
 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 ▼ 800.00

Date of Receipt 08 / 07 / 2017
Transaction ID : A6C845D0CDF2A436D84F
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 256
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. WHITTINGTON, CHARLOTTE, A, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 452 WINSOR DR
 City ANTIOCH State IL Zip Code 60002-1316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 07 / 2017
Transaction ID : A0645DD3C40E34D7797A
 Amount of Each Receipt this Period 100.00
 Memo Item

B. FAIN, ANN, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 HALFWAY RD
 City KEY LARGO State FL Zip Code 33037
 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 ▼ 300.00

Date of Receipt 08 / 08 / 2017
Transaction ID : A3A21EA2887A94227AE9
 Amount of Each Receipt this Period 300.00
 Memo Item

C. ZENTMEYER, DONALD, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14799 6130 RD
 City MONTROSE State CO Zip Code 81403-8076
 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 ▼ 350.00

Date of Receipt 08 / 10 / 2017
Transaction ID : A9A7D6DE5791442DE916
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. DOUGLASS, DONALD, J, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8961 LAKE DR
APT 306

City CAPE CANAVERAL State FL Zip Code 32920-5507

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 ▼
300.00

Date of Receipt
08 / 10 / 2017
Transaction ID : **AE364C6BBED884CF7B2F**

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 1154 HARVEST GLEN DR NW

City CLEVELAND State TN Zip Code 37312-6361

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

Name of Employer (for Individual) U S POSTAL SERVICE Occupation (for Individual) CUSTODIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
08 / 10 / 2017
Transaction ID : **AC69C5D4FCC0641709F6**

Amount of Each Receipt this Period
75.00

Memo Item

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

Mailing Address 10669 E DESERT WILLOW DR

City SCOTTSDALE State AZ Zip Code 85255

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

Name of Employer (for Individual) PRECISIONDIE&STAMPING INC Occupation (for Individual) TOOL & DIE MAKE

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
08 / 10 / 2017
Transaction ID : **AC1517BF437144A75896**

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	375.00
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 22 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. FRANKLIN, LORA, V, MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 37 PEGGY LN

City MUNFORD	State TN	Zip Code 38058-6729
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2017

Transaction ID : AE18B701571C7470A884

Amount of Each Receipt this Period
100.00

Memo Item

B. GROSS, HELEN, R, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1307 S RIVERSIDE HARBOR DR

City POST FALLS	State ID	Zip Code 83854
--------------------	-------------	-------------------

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 ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2017

Transaction ID : A9D125EEA4D074F51B5B

Amount of Each Receipt this Period
600.00

Memo Item

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

Mailing Address 195 MAPLE PATH PL

City SPRING	State TX	Zip Code 77382
----------------	-------------	-------------------

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

Name of Employer (for Individual) OUTLOOK WEALTH ADVISORS LLC	Occupation (for Individual) FINANCIAL ADVISOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2017

Transaction ID : A1FD056FF880448198AD

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. DHANSE, CATHERINE, A, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 DONNAN AVE
 APT E9
 City WASHINGTON State PA Zip Code 15301-6558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINK CHERO & REHAB Occupation (for Individual) CHIRO ASSISTANT
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **326.00**

Date of Receipt **08 / 10 / 2017**
Transaction ID : A126B635CF5D74D7FB0A
 Amount of Each Receipt this Period **45.00**
 Memo Item

B. PEMBERTON, CARLA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2905 POPLAR BLVD
 City ALHAMBRA State CA Zip Code 91803-1017
 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 **325.00**

Date of Receipt **08 / 10 / 2017**
Transaction ID : A4B773891E58F4E069D0
 Amount of Each Receipt this Period **100.00**
 Memo Item

C. ESTES, CONSTANCE, L, MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5434 E LINCOLN DR
 APT 44
 City PARADISE VALLEY State AZ Zip Code 85253-4118
 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 **2500.00**

Date of Receipt **08 / 10 / 2017**
Transaction ID : ADB0B4B88F2414BABBAAE
 Amount of Each Receipt this Period **1000.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1145.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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)
STARS AND STRIPES FOREVER PAC

A. ROSCHE, MARIE, L, MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1431 FOSTER DR

City RENO	State NV	Zip Code 89509-1209
--------------	-------------	------------------------

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 ▼
575.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2017

Transaction ID : A31B6F4B8309445BB82B

Amount of Each Receipt this Period
250.00

Memo Item

B. LESLIE, WILLIAM, F, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 STARFLOWER DR

City GRIFFIN	State GA	Zip Code 30223-5799
-----------------	-------------	------------------------

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 ▼
800.00

Date of Receipt

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

Transaction ID : AF0E2558B81084E8CB0E

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 3 CHECKERED FLAG BLVD

City SHAKOPEE	State MN	Zip Code 55379
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

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

Transaction ID : A5299CE7A5B364A8FB70

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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)
STARS AND STRIPES FOREVER PAC

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

Mailing Address 1479 SW SHORELINE DR

City PALM CITY	State FL	Zip Code 34990
-------------------	-------------	-------------------

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 ▼
6000.00

Date of Receipt

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

Transaction ID : AB35E168BB9B14DE8A2F

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 6 JUXON CT

City BALTIMORE	State MD	Zip Code 21236
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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 ▼
800.00

Date of Receipt

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

Transaction ID : A8075E73AE84E4A668DB

Amount of Each Receipt this Period
200.00

Memo Item

C. STULTZ, MARY, N, MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 262 DEERFIELD CIR

City KINGWOOD	State WV	Zip Code 26537-1358
------------------	-------------	------------------------

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 ▼
1500.00

Date of Receipt

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

Transaction ID : AC505D9C892474D8DA36

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 256
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. BLOOMFIELD, JANET, A, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3878 MUSGROVE RD
 City CHILLICOTHE State OH Zip Code 45601-9777
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL ELECTRIC RET Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt 08 / 11 / 2017
Transaction ID : A8172722984CB4112955
 Amount of Each Receipt this Period 100.00
 Memo Item

B. ENRIQUEZ, VIRGINIA, P, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6428 SOLANDRA DR S
 City JACKSONVILLE State FL Zip Code 32210-7065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PRESCHBIBLETEAC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 11 / 2017
Transaction ID : A3C3C916D07954CB5A6B
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BOE, MARILYN, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2502 CEDAR CREST DR
 City OTTAWA State IL Zip Code 61350-1212
 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 ▼ 600.00

Date of Receipt 08 / 11 / 2017
Transaction ID : AB7272AB31D7F4A33B12
 Amount of Each Receipt this Period 300.00
 Memo Item

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. EICHENBERGER, RUDOLPH, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1908 LACARI

City MAGNOLIA	State AR	Zip Code 71753
------------------	-------------	-------------------

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 ▼
205.00

Date of Receipt

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

Transaction ID : ACB9669F6593E414ABB1

Amount of Each Receipt this Period
55.00

Memo Item

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

Mailing Address 557 SE VISTA DR

City NEWPORT	State OR	Zip Code 97365-4210
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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 ▼
220.00

Date of Receipt

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

Transaction ID : A3C2C867C6A1F4EFB90A

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 4358 S DEL REY AVE

City DEL REY	State CA	Zip Code 93616-9705
-----------------	-------------	------------------------

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

Name of Employer (for Individual) WATSONVILLE P SCHOOLS	Occupation (for Individual) RET TEACHER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1096.82

Date of Receipt

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

Transaction ID : A45E3473FDB37411A9B9

Amount of Each Receipt this Period
400.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	655.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 256
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TAYLOR, WILFORD, , MR, III

Mailing Address **PO BOX 898**

City CANYON	State TX	Zip Code 79015-0898
-----------------------	--------------------	-------------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt

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

Transaction ID : A2269A655D294440FAF7

Amount of Each Receipt this Period

100.00

 Memo Item

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

Mailing Address **1106 N HARVILLE RD**

City DUNCAN	State OK	Zip Code 73533
-----------------------	--------------------	--------------------------

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

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

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt

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

Transaction ID : AE91642088DBE4F02803

Amount of Each Receipt this Period

125.00

 Memo Item

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

Mailing Address **1909 CANTERBURY ST**

City IRVING	State TX	Zip Code 75062-3551
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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 ▼ **5400.00**

Date of Receipt

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

Transaction ID : A65DA8ED29E444E51808

Amount of Each Receipt this Period

1800.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2025.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. MILES, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1077 RIVER RD
 APT 201
 City EDGEWATER State NJ Zip Code 07020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2017
Transaction ID : AA9DA35FFEF564DA8AFE
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. BROWN, JO ANN, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 872 WINDSOR GREEN DR
 City VILLA HILLS State KY Zip Code 41017
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2017
Transaction ID : AAC0647A07ABC4DC6ACF
 Amount of Each Receipt this Period
 300.00
 Memo Item

C. AKINA, ARLINE, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 99-025 LOHEA PL
 City AIEA State HI Zip Code 96701
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2017
Transaction ID : AB29B697C169443A69AA
 Amount of Each Receipt this Period
 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 30 OF 256
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

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

Mailing Address PO BOX 440

City WAPPINGERS FALLS	State NY	Zip Code 12590-0440
--------------------------	-------------	------------------------

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 ▼
536.00

Date of Receipt

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

Transaction ID : A09B02F7091D548D4BD3

Amount of Each Receipt this Period
230.00

Memo Item

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

Mailing Address 6670 RIVIERA DR

City CORAL GABLES	State FL	Zip Code 33146
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US DEPT OF JUSTICE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

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

Transaction ID : A7FA3C3F38D1D4B848FE

Amount of Each Receipt this Period
2000.00

Memo Item

C. CARTE, MARCY, MARBLE, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1404 WOODMERE DR

City CHARLESTON	State WV	Zip Code 25314-1940
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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 ▼
400.00

Date of Receipt

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

Transaction ID : AEB056C8CF8A5429B937

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2430.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 256
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. EPPLÉ, PAMELA, J, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12075 LEWIS RD
 City BRANCHVILLE State IN Zip Code 47514-9022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARY KAY Occupation (for Individual) SALES DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 14 / 2017
Transaction ID : AAC74E41F83194C6F88E
 Amount of Each Receipt this Period 200.00
 Memo Item

B. DAHLSTEDT, PAT, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13048 FARM TO MARKET RD
 City MOUNT VERNON State WA Zip Code 98273
 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 ▼ 450.00

Date of Receipt 08 / 14 / 2017
Transaction ID : AC00D7F77C3DC4840AC7
 Amount of Each Receipt this Period 200.00
 Memo Item

C. MAYER, ALLAN, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23005 N 74TH ST UNIT 4036
 City SCOTTSDALE State AZ Zip Code 85255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 15 / 2017
Transaction ID : ADDBCAC70C807476D9D2
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. RITCH, PHILIP, E, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 146 KALUAMOO ST

City KAILUA	State HI	Zip Code 96734-2144
----------------	-------------	------------------------

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 ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2017

Transaction ID : A28C22C98BD264761896

Amount of Each Receipt this Period
50.00

Memo Item

B. ODELL, THEODORE, P, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1700 S RIVER RD
APT 148

City JANESVILLE	State WI	Zip Code 53546-4507
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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 ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2017

Transaction ID : A78F13EE09B384075A96

Amount of Each Receipt this Period
100.00

Memo Item

C. BONWELL, MARYALICE, E, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1704 VILLAGE DR

City LYNDEN	State WA	Zip Code 98264-1283
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CALSTRS	Occupation (for Individual) RET ESP EDU TCH
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2017

Transaction ID : AF8F952044AAB4D9581B

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 OF 256
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. PRIERES, NORDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 632 SW 13TH AVE
 City MIAMI State FL Zip Code 33135
 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 ▼ 300.00

Date of Receipt 08 / 15 / 2017
Transaction ID : A7956D25178B34CCBA52
 Amount of Each Receipt this Period 300.00
 Memo Item

B. BOOTH, ROBERT, V D, MR, JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 930 ASHFORD DR
 City SAN ANGELO State TX Zip Code 76901-5339
 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 ▼ 300.00

Date of Receipt 08 / 15 / 2017
Transaction ID : AC7B6F8A104874ECC96E
 Amount of Each Receipt this Period 200.00
 Memo Item

C. KING, ARTHA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61 W 29TH PL APT 4308
 City EUGENE State OR Zip Code 97405-5114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 17 / 2017
Transaction ID : AE73ECC24EBB048EBA8D
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. EHRKE, MARGARET, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 JAMES
 City ALMA State NE Zip Code 68920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALMA PUBLIC SCHOOL Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2017
Transaction ID : A447C201D3685456296A
 Amount of Each Receipt this Period 50.00
 Memo Item

B. PERSONIUS, BRADLEY, E, DR., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 SERENITY LN
 City GRANTS PASS State OR Zip Code 97526-9756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHERN OREGON CARDIOLOG Occupation (for Individual) CARDIOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2017
Transaction ID : AC4AE5C1137774CB0A53
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DEPUE, PAUL, J, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6764 E HOMER BALTIMORE RD
 City HOMER State NY Zip Code 13077
 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 ▼ 800.00

Date of Receipt 08 / 18 / 2017
Transaction ID : AB495394048154858800
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 35 OF 256
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. ROSEMA, CARL, E, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10934 PORTAGE RD

City PORTAGE	State MI	Zip Code 49002-7309
-----------------	-------------	------------------------

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 ▼
300.00

Date of Receipt

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

Transaction ID : A46ADA017769D43958A9

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 9 GRANDMA'S PATH

City CANDLER	State NC	Zip Code 28715
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

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

Transaction ID : AD4F664731FE64913946

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 10785 CHERRY HILL DR

City SAN DIEGO	State CA	Zip Code 92130
-------------------	-------------	-------------------

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

Name of Employer (for Individual) SAHM	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2017

Transaction ID : AEB390ED3992043A1986

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O' NEILL, MILDRED, E, ,

Mailing Address 107 W 7TH AVE

City WEBSTER	State SD	Zip Code 57274-1331
-----------------	-------------	------------------------

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

Name of Employer (for Individual) FAIRFAX SCH - VA	Occupation (for Individual) RET LIBRARIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2017

Transaction ID : A116E4AFAB25F4065BAB

Amount of Each Receipt this Period
75.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DUNN, WILLIAM, V, MR,

Mailing Address 41964 ELSMERE RD

City AINSWORTH	State NE	Zip Code 69210-1752
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2017

Transaction ID : A87AE1D4D87FF4705A36

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
COLE, JAMES, W, , MD

Mailing Address 3500 N MADISON ST

City CORINTH	State MS	Zip Code 38834
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2017

Transaction ID : A13B851CFB21C4D9994E

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	825.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 37 OF 256
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. EYESTONE, MAYNARD, M, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2803 E WINGER RD

City MEAD	State WA	Zip Code 99021
--------------	-------------	-------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	22	/	2017

Transaction ID : AEBB9E9B6D5CF4A358F1

Amount of Each Receipt this Period
20.00

Memo Item

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

Mailing Address 309 DIVISION ST E

City BUFFALO	State MN	Zip Code 55313
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	23	/	2017

Transaction ID : A883025A01E0E4E28896

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 1004 BROADMOOR DR

City CHAMPAIGN	State IL	Zip Code 61821
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	24	/	2017

Transaction ID : ABB2CB4357A514956864

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	770.00
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 38 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. GRESSER, M, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 CHECKERED FLAG BLVD
 City SHAKOPEE State MN Zip Code 55379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 25 / 2017
Transaction ID : AC006B323EE924A448A2
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MAHONEY, EDWARD, A, MR, III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8445 FOXGLOVE AVE NW
 City CLINTON State OH Zip Code 44216-9502
 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 ▼ 2100.00

Date of Receipt 08 / 25 / 2017
Transaction ID : A8F699C1B70C14B1F82F
 Amount of Each Receipt this Period 700.00
 Memo Item

C. SEMLER, SHIRLEY, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1053 CHAMBERS RD
 City HORSEHEADS State NY Zip Code 14845-8948
 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 ▼ 400.00

Date of Receipt 08 / 28 / 2017
Transaction ID : AD8041CB8478C4187ABE
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	900.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. KEIL, EDWARD, O, , TRUSTEE

Mailing Address 401 E ATLANTIC AVE
KINGS RUN SUITE 215

City HADDON HEIGHTS State NJ Zip Code 08035

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 ▼
225.00

Date of Receipt
08 / 28 / 2017
Transaction ID : A620CCFF1A5084464AF2

Amount of Each Receipt this Period
25.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SIMPSON, WILLIAM, E, MR,

Mailing Address 11530 HERRICK LN

City LOUISVILLE State KY Zip Code 40243-1375

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 ▼
400.00

Date of Receipt
08 / 28 / 2017
Transaction ID : AA45D875C234D4E63B5A

Amount of Each Receipt this Period
25.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. DHANSE, CATHERINE, A, MS.,

Mailing Address 1300 DONNAN AVE
APT E9

City WASHINGTON State PA Zip Code 15301-6558

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

Name of Employer (for Individual) WINK CHERO & REHAB Occupation (for Individual) CHIRO ASSISTANT

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
361.00

Date of Receipt
08 / 28 / 2017
Transaction ID : AA38EE291FEB64AC4B28

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. HERBERT, DOROTHY, L, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 5294
 City AUGUSTA State ME Zip Code 04332-5294
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2017
Transaction ID : A7D8B21B8810848BBAEB
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SHEPHERD, BARRY, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2670 60TH AVE SE
 City ROCHESTER State MN Zip Code 55904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IBM Occupation (for Individual) ELECT ENG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 01 / 2017
Transaction ID : AACD040A573DC4267A71
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BERNATCHEZ, ROBERT, A, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 MARK CIR
 City RUTLAND State MA Zip Code 01543-1557
 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 ▼ 212.00

Date of Receipt 09 / 01 / 2017
Transaction ID : A2F3BC71AD49F466E869
 Amount of Each Receipt this Period 53.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 153.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. STRASSBURG, ALTA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1015 YUMA LN N
 City PLYMOUTH State MN Zip Code 55447
 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 ▼ 210.00

Date of Receipt 09 / 03 / 2017
Transaction ID : A1F7FB4D34DCA48A6A5C
 Amount of Each Receipt this Period 35.00
 Memo Item

B. CARUSO, JOEY, W, MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2521 METAIRIE HEIGHTS AVE
 City METAIRIE State LA Zip Code 70002
 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 ▼ 230.16

Date of Receipt 09 / 04 / 2017
Transaction ID : AD1B79B31082A40A1A72
 Amount of Each Receipt this Period 25.00
 Memo Item

C. COX, PHILIP, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4917 TENNESSEE AVE
 City CHATTANOOGA State TN Zip Code 37409
 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 ▼ 300.00

Date of Receipt 09 / 05 / 2017
Transaction ID : A12D854FB182A44CD940
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. HENDRICKS, DONALD, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 636
 City DOLORES State CO Zip Code 81323-0636
 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 ▼ 400.00

Date of Receipt 09 / 05 / 2017
Transaction ID : A7DB7A2E8FAF747B4B28
 Amount of Each Receipt this Period 100.00
 Memo Item

B. SIMPSON, HAROLD, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8515 COSTA VERDE BLVD UNIT 1557
 City SAN DIEGO State CA Zip Code 92122
 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 ▼ 1000.00

Date of Receipt 09 / 05 / 2017
Transaction ID : A1A57ED34E7A84CF3801
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. ACKERMAN, MERRILL, M, MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 71
 City EUREKA State SD Zip Code 57437-0071
 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 ▼ 400.00

Date of Receipt 09 / 05 / 2017
Transaction ID : A7DAC143DAB484E6691D
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

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

Mailing Address 1055 LITCHFIELD PL

City GALLATIN	State TN	Zip Code 37066-5611
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2017

Transaction ID : A3849FA9DC6554F6B8F3

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 58 BUCKSKIN RD

City BELL CANYON	State CA	Zip Code 91307-1123
---------------------	-------------	------------------------

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 ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2017

Transaction ID : A09B394AD9FBA4FD8A0A

Amount of Each Receipt this Period
35.00

Memo Item

C. PRICHARD, CAROL, L, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 315 W LAKESHORE DR

City STORM LAKE	State IA	Zip Code 50588-1723
--------------------	-------------	------------------------

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 ▼
1630.00

Date of Receipt

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

Transaction ID : A4ABC487B1B794E28978

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	635.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 44 OF 256
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. WOLGEMUTH, DONALD, H, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3001 LITITZ PIKE
 PO BOX 5093
 City LANCASTER State PA Zip Code 17606-5093
 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 ▼ 400.00

Date of Receipt 09 / 08 / 2017
Transaction ID : A8009568C6D8F4487B82
 Amount of Each Receipt this Period 100.00
 Memo Item

B. DERR, BEVERLEY, G, MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 BITLER RD
 City MILLVILLE State PA Zip Code 17846-9265
 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 ▼ 850.00

Date of Receipt 09 / 09 / 2017
Transaction ID : AF77A76A2BBF84F02A98
 Amount of Each Receipt this Period 50.00
 Memo Item

C. GALLARDO, THOMAS, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13131 HONEYBEE ST
 City MOORPARK State CA Zip Code 93021-2133
 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 ▼ 275.00

Date of Receipt 09 / 11 / 2017
Transaction ID : AE8C5DD8287B7417BA49
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 45 OF 256
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. REYNOLDS, MARY, S, MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4200 GLENARM RD

City CRESTWOOD	State KY	Zip Code 40014-8976
-------------------	-------------	------------------------

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 ▼
325.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		11		2017

Transaction ID : A34162EF144104EEDB49

Amount of Each Receipt this Period
65.00

Memo Item

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

Mailing Address 2129 12TH AVE E

City HIBBING	State MN	Zip Code 55746-1836
-----------------	-------------	------------------------

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 ▼
230.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		11		2017

Transaction ID : A094C7B5B72B14772A9E

Amount of Each Receipt this Period
210.00

Memo Item

C. GEISLER, ELLEN, S, MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 158 PROTECTORY RD

City ABBOTTSTOWN	State PA	Zip Code 17301-8987
---------------------	-------------	------------------------

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

Name of Employer (for Individual) ENGLE PRINTING COMPANY	Occupation (for Individual) DELIVERY
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		11		2017

Transaction ID : AD54CD634CB634ED0941

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	310.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 46 OF 256
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

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

Mailing Address 3715 LYNWOOD WAY

City SACRAMENTO	State CA	Zip Code 95864
--------------------	-------------	-------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2017

Transaction ID : A9BC871B551CA4F6F9AC

Amount of Each Receipt this Period
100.00

Memo Item

B. MAHONEY, EDWARD, A, MR, III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8445 FOXGLOVE AVE NW

City CLINTON	State OH	Zip Code 44216-9502
-----------------	-------------	------------------------

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 ▼
2300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2017

Transaction ID : AF5C664B515984321B9A

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 712 N LANCASHIRE LN

City LIBERTY LAKE	State WA	Zip Code 99019-8531
----------------------	-------------	------------------------

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 ▼
2050.00

Date of Receipt

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

Transaction ID : A629850821EA84DC1AC9

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. ALLEN, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1522 LAKE SHORE DR
 City LONG BEACH State IN Zip Code 46360-1456
 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 ▼ 950.16

Date of Receipt 09 / 14 / 2017
Transaction ID : ABE639D69D4B1413FBD8
 Amount of Each Receipt this Period 100.00
 Memo Item

B. TAYLOR, WILFORD, , MR, III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 898
 City CANYON State TX Zip Code 79015-0898
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 14 / 2017
Transaction ID : A14A5AEF1BC0946DD9A7
 Amount of Each Receipt this Period 100.00
 Memo Item

C. THOMAS, PATRICIA, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2660 PEACHTREE RD NW APT 31F
 City ATLANTA State GA Zip Code 30305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 15 / 2017
Transaction ID : A962F0593A6BF41DAA81
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. VARSEL, CHARLES, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 ALETA DR

City SPRING	State TX	Zip Code 77379-6104
----------------	-------------	------------------------

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 ▼
300.00

Date of Receipt

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

Transaction ID : A110BCC5D59E146D7BF8

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 11 JAMES

City ALMA	State NE	Zip Code 68920
--------------	-------------	-------------------

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

Name of Employer (for Individual) ALMA PUBLIC SCHOOL	Occupation (for Individual) TEACHER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2017

Transaction ID : AA80A63B54D1A4468994

Amount of Each Receipt this Period
50.00

Memo Item

C. PERSONIUS, BRADLEY, E, DR., MD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 195 SERENITY LN

City GRANTS PASS	State OR	Zip Code 97526-9756
---------------------	-------------	------------------------

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

Name of Employer (for Individual) SOUTHERN OREGON CARDIOLOG	Occupation (for Individual) CARDIOLOGIST
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2017

Transaction ID : ADAAFACDF43044C108FE

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. HUBBELL, DOROTHY, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 GRANDMA'S PATH

City CANDLER	State NC	Zip Code 28715
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2017

Transaction ID : A5EA2B587FD304A4FA36

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 10785 CHERRY HILL DR

City SAN DIEGO	State CA	Zip Code 92130
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SAHM	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2017

Transaction ID : AAE89F0C59AED4C9C9F4

Amount of Each Receipt this Period
50.00

Memo Item

C. DHANSE, CATHERINE, A, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1300 DONNAN AVE
APT E9

City WASHINGTON	State PA	Zip Code 15301-6558
--------------------	-------------	------------------------

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

Name of Employer (for Individual) WINK CHERO & REHAB	Occupation (for Individual) CHIRO ASSISTANT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
401.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2017

Transaction ID : A61FE7DBFF48741FC89B

Amount of Each Receipt this Period
40.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	190.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 50 OF 256
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. KELTON, LORRAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2224 SHEFFIELD DR
 City FORT COLLINS State CO Zip Code 80526
 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 ▼ 450.00

Date of Receipt 09 / 22 / 2017
Transaction ID : A40A5EAEBD85C43E3875
 Amount of Each Receipt this Period 150.00
 Memo Item

B. EYESTONE, MAYNARD, M, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2803 E WINGER RD
 City MEAD State WA Zip Code 99021
 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 ▼ 320.00

Date of Receipt 09 / 22 / 2017
Transaction ID : A2CE796C07B02418D9A7
 Amount of Each Receipt this Period 20.00
 Memo Item

C. ROSENBERG, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34846 CHANCEY RD
 City ZEPHYRHILLS State FL Zip Code 33541-3705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CITY OF TAMPA Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 22 / 2017
Transaction ID : ACA517FC4BC32419BB9C
 Amount of Each Receipt this Period 180.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. GHIZ, ROBERT, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 MIDDLESEX AVE
 City WORCESTER State MA Zip Code 01604-1932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2017
Transaction ID : A52AE889E411A41D6AB7
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SECORD, CYNTHIA, A, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 95 BEAMAN RD
 City STERLING State MA Zip Code 01564-2703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2017
Transaction ID : A270630C0D15C47919CD
 Amount of Each Receipt this Period 50.00
 Memo Item

C. KEIL, EDWARD, O, , TRUSTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 E ATLANTIC AVE
 KINGS RUN SUITE 215
 City HADDON HEIGHTS State NJ Zip Code 08035
 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 ▼ 275.00

Date of Receipt 09 / 25 / 2017
Transaction ID : A56DD07387CF641768A0
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 52 OF 256
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. MCDOWELL, PATRICIA, A, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2308 DOUGLAS DR

City CARLISLE	State PA	Zip Code 17013-1094
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2017

Transaction ID : A1E4401C07E5C41D599F

Amount of Each Receipt this Period
100.00

Memo Item

B. KSINIEWICH, CHARLES, F, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 215 AVERY AVE

City SYRACUSE	State NY	Zip Code 13204-1827
------------------	-------------	------------------------

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

Name of Employer (for Individual) SYRACUSE UNIVERSITY	Occupation (for Individual) RETAIL CLERK
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2017

Transaction ID : AD7DFA92439054B76927

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 525 PARK PLACE DR

City ALEXANDRIA	State LA	Zip Code 71301-3947
--------------------	-------------	------------------------

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

Name of Employer (for Individual) PREMIER PEDIATRIC CLINIC	Occupation (for Individual) PEDIATRICIAN
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2017

Transaction ID : A91C2D8CF48CF4752926

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 53 OF 256
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

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

Mailing Address 2312 AMHERST ST

City FORT COLLINS	State CO	Zip Code 80525-1826
----------------------	-------------	------------------------

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 ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2017

Transaction ID : A49B7EEF280B147C5BD6

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 1801 20TH ST
UNIT B13

City AMES	State IA	Zip Code 50010
--------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2017

Transaction ID : A3421FBF27F3C466D9CC

Amount of Each Receipt this Period
100.00

Memo Item

C. DOUGLASS, DONALD, J, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8961 LAKE DR
APT 306

City CAPE CANAVERAL	State FL	Zip Code 32920-5507
------------------------	-------------	------------------------

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 ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2017

Transaction ID : A2A070F9A233C4695B1A

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. DOULET, DAN, C, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4800 AMELIA ISLAND PKWY
APT 119A

City FERNANDINA BEACH State FL Zip Code 32034-5737

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 ▼ 285.00

Date of Receipt 09 / 26 / 2017

Transaction ID : ACD660FE637B846B7B40

Amount of Each Receipt this Period 35.00

Memo Item

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

Mailing Address 7907 ALETA DR

City SPRING State TX Zip Code 77379-6104

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 ▼ 400.00

Date of Receipt 09 / 26 / 2017

Transaction ID : A88D72EDDCF854A7B868

Amount of Each Receipt this Period 100.00

Memo Item

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

Mailing Address 1004 W CRESCENT AVE

City REDLANDS State CA Zip Code 92373-6649

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 ▼ 219.00

Date of Receipt 09 / 26 / 2017

Transaction ID : A7B8CA910778F4E2A9A5

Amount of Each Receipt this Period 30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 165.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 55 OF 256
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. LESLIE, WILLIAM, F, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 STARFLOWER DR

City GRIFFIN	State GA	Zip Code 30223-5799
-----------------	-------------	------------------------

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 ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2017

Transaction ID : A623DC0B56F1C431399E

Amount of Each Receipt this Period
200.00

Memo Item

B. DHANSE, CATHERINE, A, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1300 DONNAN AVE
APT E9

City WASHINGTON	State PA	Zip Code 15301-6558
--------------------	-------------	------------------------

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

Name of Employer (for Individual) WINK CHERO & REHAB	Occupation (for Individual) CHIRO ASSISTANT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
441.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2017

Transaction ID : AC854BA42748042719C0

Amount of Each Receipt this Period
40.00

Memo Item

C. DEPUE, PAUL, J, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6764 E HOMER BALTIMORE RD

City HOMER	State NY	Zip Code 13077
---------------	-------------	-------------------

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 ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2017

Transaction ID : A413AC69B06B84D64B6E

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	340.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 56 OF 256
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. STULTZ, MARY, N, MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 262 DEERFIELD CIR

City KINGWOOD	State WV	Zip Code 26537-1358
------------------	-------------	------------------------

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 ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2017

Transaction ID : A9F615EED6AAF4266801

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 2502 CEDAR CREST DR

City OTTAWA	State IL	Zip Code 61350-1212
----------------	-------------	------------------------

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 ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2017

Transaction ID : A4C3AE5E9A27442D0A73

Amount of Each Receipt this Period
100.00

Memo Item

C. MCWILLIAMS, LARRY, R, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5024 ROUNDTREE CT

City HALTOM CITY	State TX	Zip Code 76137-2193
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2017

Transaction ID : ADF385D5E4C874001B33

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. PRETZ, JEANIE, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 WOODROW ST
 UNIT 501
 City COLUMBIA State SC Zip Code 29205-1772
 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 ▼ 600.00

Date of Receipt 09 / 28 / 2017
Transaction ID : A364F60EB75FC4434983
 Amount of Each Receipt this Period 300.00
 Memo Item

B. BRISCOE, FRANCIS, J, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6150 RUSTIC HILLS DR
 City ROCKLIN State CA Zip Code 95677-3209
 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 ▼ 300.00

Date of Receipt 09 / 28 / 2017
Transaction ID : AE5719B2C703C48AEB94
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MCMILLAN, SUZANNE, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 CRYSTAL CANYON PL
 City THE WOODLANDS State TX Zip Code 77389
 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 ▼ 600.00

Date of Receipt 09 / 28 / 2017
Transaction ID : ADD15F11520F1419AA71
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. BOWMAN, FREDERICK, , , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 350 CAROLINA MEADOWS VILLA
 City CHAPEL HILL State NC Zip Code 27517-7549
 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 ▼ 300.00

Date of Receipt 09 / 28 / 2017
Transaction ID : A623C9885BE0548C2B06
 Amount of Each Receipt this Period 100.00
 Memo Item

B. ROGERS, DOROTHY, S, MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 QUAIL CT
 City CHRISMAN State IL Zip Code 61924-1000
 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 ▼ 400.00

Date of Receipt 09 / 28 / 2017
Transaction ID : A387F6BB24CC443C2B59
 Amount of Each Receipt this Period 200.00
 Memo Item

C. SYNNESTVEDT, ANNE, T, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 550
 City BRYN ATHYN State PA Zip Code 19009-0334
 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 ▼ 1500.00

Date of Receipt 09 / 28 / 2017
Transaction ID : ACF99E00B57394CB8B45
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 256
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. COLE, JAMES, W, , MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3500 N MADISON ST
 City CORINTH State MS Zip Code 38834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 29 / 2017
Transaction ID : A9924E1F96461422FB9E
 Amount of Each Receipt this Period 200.00
 Memo Item

B. FOERSTER, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1882 FERNRIDGE DR
 City SAN DIMAS State CA Zip Code 91773
 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 ▼ 300.00

Date of Receipt 09 / 29 / 2017
Transaction ID : AA73AC357B25540B2A0A
 Amount of Each Receipt this Period 300.00
 Memo Item

C. BUNGE, MELVIN, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2075 TREFOIL RD NE
 City WAVERLY State KS Zip Code 66871
 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 ▼ 300.00

Date of Receipt 09 / 29 / 2017
Transaction ID : A1FAE44109E3948B796A
 Amount of Each Receipt this Period 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. BURIANEK, BRUCE, L, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3010 QUINCANNON LN

City HOUSTON	State TX	Zip Code 77043-1201
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
660.00

Date of Receipt

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

Transaction ID : A2847C1ECEEE254E9C8C2

Amount of Each Receipt this Period
260.00

Memo Item

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

Mailing Address 2224 SHEFFIELD DR

City FORT COLLINS	State CO	Zip Code 80526
----------------------	-------------	-------------------

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 ▼
675.00

Date of Receipt

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

Transaction ID : ADFA2F4893DED4B6AAF4

Amount of Each Receipt this Period
225.00

Memo Item

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

Mailing Address 41964 ELSMERE RD

City AINSWORTH	State NE	Zip Code 69210-1752
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

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

Transaction ID : ABAA0A19B43FB44E789D

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	985.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. HAVARD, JANET, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1510 OAK CREEK DR
 APT 203
 City PALO ALTO State CA Zip Code 94304-2034
 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 ▼ 300.00

Date of Receipt 09 / 29 / 2017
Transaction ID : A5D3426B38C1B446AB11
 Amount of Each Receipt this Period 100.00
 Memo Item

B. VALERIUS, JOHN, B, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1909 CANTERBURY ST
 City IRVING State TX Zip Code 75062-3551
 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 ▼ 7200.00

Date of Receipt 09 / 29 / 2017
Transaction ID : ADD2F908DF84D45B4996
 Amount of Each Receipt this Period 1800.00
 Memo Item

C. SMALLEY, SYLVIA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 KATHERINE DR
 City WARREN State NJ Zip Code 07059-7011
 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 ▼ 210.00

Date of Receipt 09 / 29 / 2017
Transaction ID : AB4E0565F254E42CB966
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1930.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 62 OF 256
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. ROSEMA, CARL, E, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10934 PORTAGE RD

City PORTAGE	State MI	Zip Code 49002-7309
-----------------	-------------	------------------------

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 ▼
400.00

Date of Receipt

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

Transaction ID : A134CA6E16AFE47F1919

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 534 NITA DR

City FULTON	State MS	Zip Code 38843
----------------	-------------	-------------------

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

Name of Employer (for Individual) TUPELO ANESTHESIA GROUP	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

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

Transaction ID : ADCCF5AEDF00F444B9AC

Amount of Each Receipt this Period
250.00

Memo Item

C. EVANS, EVAN, WILSON, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 631A CESSNA AVE

City FRIDAY HARBOR	State WA	Zip Code 98250-9145
-----------------------	-------------	------------------------

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 ▼
375.00

Date of Receipt

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

Transaction ID : A3E3C056EA62E441B9C8

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. PHILLIPS, GEORGE, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 COLLEGE PL
 APT 413
 City NORFOLK State VA Zip Code 23510
 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 ▼ 300.00

Date of Receipt 09 / 29 / 2017
Transaction ID : AE90CD331CEBC4724BD3
 Amount of Each Receipt this Period 150.00
 Memo Item

B. GRESSER, M, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 CHECKERED FLAG BLVD
 City SHAKOPEE State MN Zip Code 55379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 29 / 2017
Transaction ID : A2D691EA9B6574CFE8B5
 Amount of Each Receipt this Period 200.00
 Memo Item

C. MOORE, FRANK, H, , II
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3701 MAYFIELD RD
 APT 214
 City CLEVELAND State OH Zip Code 44121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2017
Transaction ID : A1749209F352B4AD390E
 Amount of Each Receipt this Period 150.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. HERBERT, DOROTHY, L, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 5294
 City AUGUSTA State ME Zip Code 04332-5294
 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 ▼ 300.00

Date of Receipt 09 / 30 / 2017
Transaction ID : AA147C0391DEE4D59802
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SHEPHERD, BARRY, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2670 60TH AVE SE
 City ROCHESTER State MN Zip Code 55904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IBM Occupation (for Individual) ELECT ENG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 01 / 2017
Transaction ID : AD7B7A826F22646AA831
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HEIDE, CHARLES, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5825 6TH PL
 City KENOSHA State WI Zip Code 53144
 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 ▼ 1500.00

Date of Receipt 10 / 02 / 2017
Transaction ID : ABF8F6A038ED2450DB28
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 256
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. NIKKEL, JOHN, G.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1101 W 84TH ST
 City TULSA State OK Zip Code 74132
 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 ▼ 300.00

Date of Receipt 10 / 02 / 2017
Transaction ID : ADE7DF0F39060437F80A
 Amount of Each Receipt this Period 200.00
 Memo Item

B. CLARK, MARY, E, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9317 S 390 E
 City LA FONTAINE State IN Zip Code 46940-9072
 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 ▼ 225.00

Date of Receipt 10 / 02 / 2017
Transaction ID : A815083AB721345C0ACA
 Amount of Each Receipt this Period 75.00
 Memo Item

C. BLOOMFIELD, JANET, A, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3878 MUSGROVE RD
 City CHILLICOTHE State OH Zip Code 45601-9777
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL ELECTRIC RET Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 545.00

Date of Receipt 10 / 02 / 2017
Transaction ID : AD8B5CFD70F514F799B3
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. KONKEL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3203 STATE HIGHWAY 17
 City PHELPS State WI Zip Code 54554
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 02 / 2017
Transaction ID : AE9DB16B1DCA0404CA6E
 Amount of Each Receipt this Period 100.00
 Memo Item

B. HARTMAN, ALLEN, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2909 HILLCROFT ST STE 420
 City HOUSTON State TX Zip Code 77057-5815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARTMAN & ASSOCIATES Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 02 / 2017
Transaction ID : A83CD3A0B21F641759F2
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. DICKSON, SUE, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3014 KEY HARBOR DR
 City SAFETY HARBOR State FL Zip Code 34695
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SDSTT.COM Occupation (for Individual) EDUCURRDESIGN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 02 / 2017
Transaction ID : A58FA58D7ECD34C6BB1E
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. POSSIN, MARC, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6093 N 2200TH AVE
 City GENESEO State IL Zip Code 61254-8834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHN DEERE SHARED SERVICES INC Occupation (for Individual) TECHNOLOGY ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2017
Transaction ID : A33FC97B5F7AE448D8B1
 Amount of Each Receipt this Period
 20.00
 Memo Item

B. HOLTON, LEYLA, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10288 IRON ORE RD
 City CONROE State TX Zip Code 77303-2410
 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 ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2017
Transaction ID : A0C49CFAF85B34EAEB5C
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. MUNN, ARNOLD, S, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9708 W HAWTHORNE ST
 City CRYSTAL RIVER State FL Zip Code 34428-6111
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2017
Transaction ID : A7D1EF4E2516F4362835
 Amount of Each Receipt this Period
 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	420.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 68 OF 256
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. KING, ARTHA, , MS.,

Mailing Address 61 W 29TH PL
APT 4308

City EUGENE State OR Zip Code 97405-5114

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 ▼
600.00

Date of Receipt
10 / 02 / 2017
Transaction ID : AF368ADA7E479451FAC7

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 15 ASHLAWN BLVD

City PALMYRA State VA Zip Code 22963-3329

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 ▼
225.00

Date of Receipt
10 / 02 / 2017
Transaction ID : A25D6A894DC3144119DF

Amount of Each Receipt this Period
25.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. BRITTON, LYNDA, R, MS.,

Mailing Address 9913 LAKE SHORE BLVD

City CLEVELAND State OH Zip Code 44108-1052

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 ▼
18000.00

Date of Receipt
10 / 03 / 2017
Transaction ID : ABCD138D15C6E4970A1F

Amount of Each Receipt this Period
9000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	9125.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 256
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ACKERMAN, MERRILL, M, MRS.,

Mailing Address **PO BOX 71**

City EUREKA	State SD	Zip Code 57437-0071
-----------------------	--------------------	-------------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 03 / 2017

Transaction ID : AE8F8951A0BEC4D529CE

Amount of Each Receipt this Period

100.00

 Memo Item

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

Mailing Address **10669 E DESERT WILLOW DR**

City SCOTTSDALE	State AZ	Zip Code 85255
---------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) PRECISIONDIE&STAMPING INC	Occupation (for Individual) TOOL & DIE MAKE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 03 / 2017

Transaction ID : A44DB7AA0501540759FB

Amount of Each Receipt this Period

50.00

 Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. HERBERT, DOROTHY, L, MS.,

Mailing Address **PO BOX 5294**

City AUGUSTA	State ME	Zip Code 04332-5294
------------------------	--------------------	-------------------------------

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 ▼ **350.00**

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 03 / 2017

Transaction ID : AC3B3F37FE63046C3938

Amount of Each Receipt this Period

50.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. GARCIA, ESPERANZA, G, MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 94-405 IKEPONO ST

City WAIPAHU	State HI	Zip Code 96797-1619
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee.

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : A081E208451524D6B975

Amount of Each Receipt this Period

Memo Item

B. SZAFAROWICZ, EUGENE, E, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PSC 76 BOX 2664

City APO	State AP	Zip Code 96319-0005
-------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) AAFES	Occupation (for Individual) RETAIL SHIFT MG
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : A2AB9F207E6F64D27984

Amount of Each Receipt this Period

Memo Item

C. MULLINS, WILLIAM, S, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 TWIN OAKS PL

City LAUREL	State MS	Zip Code 39440
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FEC ID number of contributing federal political committee.

Name of Employer (for Individual) HORTMAN HARLOW LAW	Occupation (for Individual) LAWYER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : A34B32BD9DA9E4037BE6

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="400.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. EICHENBERGER, RUDOLPH, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1908 LACARI
 City MAGNOLIA State AR Zip Code 71753
 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 ▼ 260.00

Date of Receipt 10 / 03 / 2017
Transaction ID : AF0767A7B37CF4E65AB9
 Amount of Each Receipt this Period 55.00
 Memo Item

B. STRASSBURG, ALTA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1015 YUMA LN N
 City PLYMOUTH State MN Zip Code 55447
 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 ▼ 245.00

Date of Receipt 10 / 03 / 2017
Transaction ID : AF32F8D18C48D48E3817
 Amount of Each Receipt this Period 35.00
 Memo Item

C. GALLARDO, THOMAS, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13131 HONEYBEE ST
 City MOORPARK State CA Zip Code 93021-2133
 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 ▼ 325.00

Date of Receipt 10 / 03 / 2017
Transaction ID : A787622779CE94456B5D
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 140.00
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 72 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. STINEBISER, RONALD, G, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1195 LA MOREE RD
SPC 112

City SAN MARCOS State CA Zip Code 92078-4531

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

Name of Employer (for Individual) US NAVY Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 03 / 2017
Transaction ID : AC50354A8EC9844B98E6

Amount of Each Receipt this Period 100.00

Memo Item

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

Mailing Address 3715 LYNWOOD WAY

City SACRAMENTO State CA Zip Code 95864

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 ▼ 400.00

Date of Receipt 10 / 04 / 2017
Transaction ID : AD9431005875C4DD1B81

Amount of Each Receipt this Period 100.00

Memo Item

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

Mailing Address 1522 LAKE SHORE DR

City LONG BEACH State IN Zip Code 46360-1456

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 ▼ 1050.16

Date of Receipt 10 / 04 / 2017
Transaction ID : A764018DCD7394EA0B40

Amount of Each Receipt this Period 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. CARUSO, JOEY, W, MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2521 METAIRIE HEIGHTS AVE

City METAIRIE	State LA	Zip Code 70002
------------------	-------------	-------------------

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 ▼
255.16

Date of Receipt

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

Transaction ID : A876A9DB0426D47B0BC8

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 3276 TOPAZ LN

City CAMERON PARK	State CA	Zip Code 95682-8514
----------------------	-------------	------------------------

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 ▼
225.00

Date of Receipt

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

Transaction ID : AC1F69EB895734603A5A

Amount of Each Receipt this Period
75.00

Memo Item

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

Mailing Address 22720 CAVALIER ST

City WOODLAND HILLS	State CA	Zip Code 91364
------------------------	-------------	-------------------

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 ▼
325.00

Date of Receipt

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

Transaction ID : A4E0D46DF5FBB4405886

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. BANKS, ELIZABETH, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1106 N HARVILLE RD
 City DUNCAN State OK Zip Code 73533
 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 ▼ 425.00

Date of Receipt 10 / 05 / 2017
Transaction ID : AF70A9D25C712447D997
 Amount of Each Receipt this Period 200.00
 Memo Item

B. MCWHIRTER, DOROTHY, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 BUCKSKIN RD
 City BELL CANYON State CA Zip Code 91307-1123
 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 ▼ 245.00

Date of Receipt 10 / 05 / 2017
Transaction ID : A411EBE01589A4135A40
 Amount of Each Receipt this Period 35.00
 Memo Item

C. COX, PHILIP, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4917 TENNESSEE AVE
 City CHATTANOOGA State TN Zip Code 37409
 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 ▼ 350.00

Date of Receipt 10 / 05 / 2017
Transaction ID : A00EED94DD8104ABC8CB
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	285.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 75 OF 256
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. REYNOLDS, MARY, S, MRS.,		Date of Receipt
Mailing Address 4200 GLENARM RD		<input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2017"/>
City CRESTWOOD	State KY	Zip Code 40014-8976
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A2998D26C31F64A7EB92
Name of Employer (for Individual) RETIRED		Amount of Each Receipt this Period <input type="text" value="65.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="390.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SIMPSON, HAROLD, A, ,		Date of Receipt
Mailing Address 8515 COSTA VERDE BLVD UNIT 1557		<input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2017"/>
City SAN DIEGO	State CA	Zip Code 92122
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : ABC935C34938B47FE8D2
Name of Employer (for Individual) RETIRED		Amount of Each Receipt this Period <input type="text" value="300.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1300.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. DRIPPS, WILLIAM, F, ,		Date of Receipt
Mailing Address 1404 32ND ST		<input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2017"/>
City LAUREL	State MS	Zip Code 39440
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A31BB846705AC469782E
Name of Employer (for Individual) RETIRED		Amount of Each Receipt this Period <input type="text" value="300.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="665.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. SMITH, S, LEE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1154 HARVEST GLEN DR NW
 City CLEVELAND State TN Zip Code 37312-6361
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U S POSTAL SERVICE Occupation (for Individual) CUSTODIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 06 / 2017
Transaction ID : A44B1D8E775174ECCA7D
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MELCHING, DONALD, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1875 RANCHO TUJUNGA DR
 City COVINA State CA Zip Code 91724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LORDON ENTERPRISES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 06 / 2017
Transaction ID : AA1924A80E19B4AD4845
 Amount of Each Receipt this Period 500.00
 Memo Item

C. GOOS, JEAN, M, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7840 W PAINE AVE
 City LAKEWOOD State CO Zip Code 80235-1920
 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 ▼ 350.00

Date of Receipt 10 / 06 / 2017
Transaction ID : ABC9E9BBFD3924E3987A
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

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

Mailing Address 6 JUXON CT

City BALTIMORE	State MD	Zip Code 21236
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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 ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		06		2017

Transaction ID : A754890E95891480E91D

Amount of Each Receipt this Period
200.00

Memo Item

B. BROWN, JO ANN, C, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 872 WINDSOR GREEN DR

City VILLA HILLS	State KY	Zip Code 41017
---------------------	-------------	-------------------

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 ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		09		2017

Transaction ID : A54B49A9DEA0645DCA93

Amount of Each Receipt this Period
100.00

Memo Item

C. ST CLAIR, ANNE, K, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8900 INGLESIDE FARM LN

City MECHANICSVILLE	State VA	Zip Code 23111-2600
------------------------	-------------	------------------------

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 ▼
229.66

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		09		2017

Transaction ID : A832DCB4D323B4AE7A2D

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. WELLS, KEITHA, K, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3911 APPALACHIAN TRL

City KINGWOOD	State TX	Zip Code 77345-1022
------------------	-------------	------------------------

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 ▼
350.00

Date of Receipt
10 / 09 / 2017

Transaction ID : A11F7843BFA3E4B29ADC

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 231 INVERNESS PL

City GLENDDORA	State CA	Zip Code 91741-3940
-------------------	-------------	------------------------

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

Name of Employer (for Individual) LOS ANGELES CO	Occupation (for Individual) RET FIREMAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
10 / 09 / 2017

Transaction ID : A144D3906FA784441A86

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 105 E ROKIWAN RD

City JAMESTOWN	State ND	Zip Code 58401-7601
-------------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED	Occupation (for Individual) INFORMATION REQUESTED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 09 / 2017

Transaction ID : A048723DCE8774E46A41

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. LESLIE, WILLIAM, F, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 STARFLOWER DR

City GRIFFIN	State GA	Zip Code 30223-5799
-----------------	-------------	------------------------

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 ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2017

Transaction ID : AF89DB75B50494AE9921

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 10801 W CHARLESTON BLVD
SUITE 400

City LAS VEGAS	State NV	Zip Code 89135
-------------------	-------------	-------------------

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

Name of Employer (for Individual) WORK IN THE HOME	Occupation (for Individual) SELF EMPLOYED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID : A165B2C77C98143DC988

Amount of Each Receipt this Period
5000.00

Memo Item

C. HENDERSON, SHIRLEY, H, MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2050 BEAVERCREEK RD
101-307

City BEAVERCREEK	State OR	Zip Code 97004-0787
---------------------	-------------	------------------------

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 ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

Transaction ID : A636E55110836426AA35

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. GODWIN, JOE, R, CSM, RET
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 555 PARK AVE

City FOLEY State AL Zip Code 36535-1136

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 ▼ 505.00

Date of Receipt 10 / 13 / 2017
Transaction ID : A8C3AD441A3624492AAD

Amount of Each Receipt this Period 130.00

Memo Item

B. DHANSE, CATHERINE, A, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1300 DONNAN AVE
APT E9

City WASHINGTON State PA Zip Code 15301-6558

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

Name of Employer (for Individual) WINK CHERO & REHAB Occupation (for Individual) CHIRO ASSISTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt 10 / 13 / 2017
Transaction ID : A7A5F33DFE432448B9C0

Amount of Each Receipt this Period 60.00

Memo Item

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

Mailing Address 36 GREELEY HILL RD

City BEDFORD State NH Zip Code 03110-4657

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 ▼ 225.00

Date of Receipt 10 / 13 / 2017
Transaction ID : A5F08B3631D054F95997

Amount of Each Receipt this Period 40.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 230.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. TAYLOR, WILFORD, , MR, III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 898
 City CANYON State TX Zip Code 79015-0898
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 14 / 2017
Transaction ID : A3F7EB9CDC4F84B7389F
 Amount of Each Receipt this Period 100.00
 Memo Item

B. JOHNSON, WILMA, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1342 W LAUREL RD
 City LONDON State KY Zip Code 40741-8209
 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 ▼ 425.00

Date of Receipt 10 / 16 / 2017
Transaction ID : A828B6633DB5548AF932
 Amount of Each Receipt this Period 200.00
 Memo Item

C. BERNATCHEZ, ROBERT, A, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 MARK CIR
 City RUTLAND State MA Zip Code 01543-1557
 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 ▼ 265.00

Date of Receipt 10 / 16 / 2017
Transaction ID : A8A0C399ABFE5420A864
 Amount of Each Receipt this Period 53.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	353.00
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 82 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. PERSONIUS, BRADLEY, E, DR., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 SERENITY LN
 City GRANTS PASS State OR Zip Code 97526-9756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHERN OREGON CARDIOLOG Occupation (for Individual) CARDIOLOGIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2017
Transaction ID : A54B0140240A948B08BC
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. CARTER, JAY, W, MR, JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2730 COMMERCE ST STE 500
 City WICHITA FALLS State TX Zip Code 76301-8000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARTER AVIATION Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2017
Transaction ID : AF65F8098439447FFA67
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. DILL, JOHN, C, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 CLAYMONT PKWY
 City TUSCALOOSA State AL Zip Code 35404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2017
Transaction ID : A25997302C4DA45D5B08
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. EHRKE, MARGARET, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 JAMES

City ALMA	State NE	Zip Code 68920
--------------	-------------	-------------------

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

Name of Employer (for Individual) ALMA PUBLIC SCHOOL	Occupation (for Individual) TEACHER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2017

Transaction ID : AA000654F67294BF3ABF

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 9 GRANDMA'S PATH

City CANDLER	State NC	Zip Code 28715
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2017

Transaction ID : A3CB424F8735E4BB4A55

Amount of Each Receipt this Period
100.00

Memo Item

C. PRAEGER, DOROTHY, A, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 59 SAN BENITO WAY

City SAN FRANCISCO	State CA	Zip Code 94127-1501
-----------------------	-------------	------------------------

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 ▼
320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

Transaction ID : A9FC19AAB5C184E208EB

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	170.00
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 84 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. ALLEN, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1522 LAKE SHORE DR
 City LONG BEACH State IN Zip Code 46360-1456
 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 ▼ 1175.16

Date of Receipt 10 / 19 / 2017
Transaction ID : A9C2C4243827A4FECB9D
 Amount of Each Receipt this Period 125.00
 Memo Item

B. HUNTER, JAMES, S, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19330 BEAUFAIN ST
 City CORNELIUS State NC Zip Code 28031-5531
 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 ▼ 800.00

Date of Receipt 10 / 19 / 2017
Transaction ID : AC852A776E2BE4678BAE
 Amount of Each Receipt this Period 300.00
 Memo Item

C. EPPLE, PAMELA, J, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12075 LEWIS RD
 City BRANCHVILLE State IN Zip Code 47514-9022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARY KAY Occupation (for Individual) SALES DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 19 / 2017
Transaction ID : A5E016D8E15D24DF9BB9
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	625.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. MEADE, THOMAS, C, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3381 STONE CITY RD

City CENTRAL CITY	State IA	Zip Code 52214-9641
----------------------	-------------	------------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

Transaction ID : AE7F2F1D7304647F68FC

Amount of Each Receipt this Period
150.00

Memo Item

B. SHOTWELL, DONNA, JEAN, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1261 PINE CREEK WAY
APT B

City CONCORD	State CA	Zip Code 94520-3645
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

Transaction ID : A306B29601D334DC79E5

Amount of Each Receipt this Period
30.00

Memo Item

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

Mailing Address 10785 CHERRY HILL DR

City SAN DIEGO	State CA	Zip Code 92130
-------------------	-------------	-------------------

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

Name of Employer (for Individual) SAHM	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

Transaction ID : A856DDDF4398A84401A95

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	230.00
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 86 OF 256
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. EYESTONE, MAYNARD, M, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2803 E WINGER RD
 City MEAD State WA Zip Code 99021
 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 ▼ 340.00

Date of Receipt 10 / 22 / 2017
Transaction ID : A901F3F31DADF473BB38
 Amount of Each Receipt this Period 20.00
 Memo Item

B. TIMMERMEISTER, WILLIAM, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10044 TOWNSHIP ROAD 253
 City LAKEVIEW State OH Zip Code 43331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 23 / 2017
Transaction ID : A32E2867561E04ED5A08
 Amount of Each Receipt this Period 250.00
 Memo Item

C. HARR, KENNETH, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40464 ORANGELAWN AVE
 City PLYMOUTH State MI Zip Code 48170
 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 ▼ 300.00

Date of Receipt 10 / 23 / 2017
Transaction ID : A68FAF48F536741AF80D
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	520.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. RITCH, PHILIP, E, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 146 KALUAMOO ST

City KAILUA	State HI	Zip Code 96734-2144
----------------	-------------	------------------------

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 ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

Transaction ID : A1983FFF796254495B91

Amount of Each Receipt this Period
75.00

Memo Item

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

Mailing Address 555 COUCH AVE
APT 203

City SAINT LOUIS	State MO	Zip Code 63122
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

Transaction ID : A2BA33B279FEB44B882C

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 949 RIVER ST

City GASSAWAY	State WV	Zip Code 26624-1183
------------------	-------------	------------------------

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 ▼
221.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

Transaction ID : AA80EF3B93D1548259DC

Amount of Each Receipt this Period
45.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	620.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 88 OF 256
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. PORTER, HOWARD, F, MR, III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 392
 City GASTON State NC Zip Code 27832-0392
 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 ▼ 300.00

Date of Receipt 10 / 23 / 2017
Transaction ID : A4C5F3A86B79F41468AB
 Amount of Each Receipt this Period 100.00
 Memo Item

B. GALKIN, WARREN, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29 SAGE DR
 City WARWICK State RI Zip Code 02886
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N PRODUCTS CORP Occupation (for Individual) VICE CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 23 / 2017
Transaction ID : A8DEE17C682C64217995
 Amount of Each Receipt this Period 500.00
 Memo Item

C. ENGELMAN, F, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1849 LA BELLEZZA GRV
 City COLORADO SPRINGS State CO Zip Code 80919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 23 / 2017
Transaction ID : A872938535D2A438AA0B
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	850.00
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 89 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. WILLARD, HENRY, KELLOGG, , II
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3269
 City SHEPHERDSTOWN State WV Zip Code 25443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 23 / 2017
Transaction ID : A8AE9EB97F7724BD0B71
 Amount of Each Receipt this Period 250.00
 Memo Item

B. WOODRUFF, PIERS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 503
 City SOMERSET State VA Zip Code 22972
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 23 / 2017
Transaction ID : AF2DB95C1862B408ABC9
 Amount of Each Receipt this Period 100.00
 Memo Item

C. JACKSON, EVELYN, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 RIVERBEND DR
 City SHELBY State OH Zip Code 44875
 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 ▼ 600.00

Date of Receipt 10 / 24 / 2017
Transaction ID : AB1AFDD9C26214678BD7
 Amount of Each Receipt this Period 600.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 90 OF 256
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. FRANKLIN, LORA, V, MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 37 PEGGY LN

City MUNFORD	State TN	Zip Code 38058-6729
-----------------	-------------	------------------------

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 ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2017

Transaction ID : A9C5171DE64D44775BE0

Amount of Each Receipt this Period
100.00

Memo Item

B. WHITTINGTON, CHARLOTTE, A, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 452 WINSOR DR

City ANTIOCH	State IL	Zip Code 60002-1316
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
470.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2017

Transaction ID : A5DED50F807C848E8862

Amount of Each Receipt this Period
120.00

Memo Item

C. BRISCOE, FRANCIS, J, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6150 RUSTIC HILLS DR

City ROCKLIN	State CA	Zip Code 95677-3209
-----------------	-------------	------------------------

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 ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2017

Transaction ID : A0BD0E304ABD1499C8A2

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	320.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 91 OF 256
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. DHANSE, CATHERINE, A, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 DONNAN AVE
 APT E9
 City WASHINGTON State PA Zip Code 15301-6558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINK CHERO & REHAB Occupation (for Individual) CHIRO ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 541.00

Date of Receipt 10 / 24 / 2017
Transaction ID : A528D0D9656DE4874A5A
 Amount of Each Receipt this Period 40.00
 Memo Item

B. RINEHART, JOE, F, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 HARDEMAN AVE
 City FORT VALLEY State GA Zip Code 31030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEACH CO B O E Occupation (for Individual) RET SCH COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 24 / 2017
Transaction ID : A4686C5B1CD74459481D
 Amount of Each Receipt this Period 125.00
 Memo Item

C. MCGREGOR, LARRY, L, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7425 E PRINCESS BLVD
 UNIT 1027
 City SCOTTSDALE State AZ Zip Code 85255-5124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2017
Transaction ID : A41846F0F60CD4A1FBC0
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	265.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

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

Mailing Address 1909 CANTERBURY ST

City IRVING	State TX	Zip Code 75062-3551
----------------	-------------	------------------------

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 ▼
9000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2017

Transaction ID : A05326AD275D84A3AAC4

Amount of Each Receipt this Period
1800.00

Memo Item

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

Mailing Address 55 DINSMORE AVE
APT 608

City FRAMINGHAM	State MA	Zip Code 01702-6028
--------------------	-------------	------------------------

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 ▼
445.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2017

Transaction ID : A9E00C54CCB55484BB21

Amount of Each Receipt this Period
70.00

Memo Item

C. STULTZ, MARY, N, MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 262 DEERFIELD CIR

City KINGWOOD	State WV	Zip Code 26537-1358
------------------	-------------	------------------------

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 ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2017

Transaction ID : A47AA2AB899EE4E5EB59

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2370.00
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 93 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. STEVENS, CARL, EDWIN, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29358 N COUNTY ROAD 3180
 City ELMORE CITY State OK Zip Code 73433-9052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US POSTAL SERVICE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2017
Transaction ID : AD1690965A8A544D6886
 Amount of Each Receipt this Period 100.00
 Memo Item

B. DOUGLASS, DONALD, J, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8961 LAKE DR APT 306
 City CAPE CANAVERAL State FL Zip Code 32920-5507
 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 ▼ 600.00

Date of Receipt 10 / 24 / 2017
Transaction ID : A8DA586DF724441459D7
 Amount of Each Receipt this Period 200.00
 Memo Item

C. BARTLETT, KENNETH, S, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 324 HEARTHSTONE RIDGE RD
 City LANDRUM State SC Zip Code 29356-9602
 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 ▼ 750.00

Date of Receipt 10 / 24 / 2017
Transaction ID : ABDE2FD3A6DB14DFCACI
 Amount of Each Receipt this Period 450.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 256
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. HESSELMAN, CLAUDE, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2545 BAINBRIDGE BLVD
 City CHESAPEAKE State VA Zip Code 23324
 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 ▼ 340.00

Date of Receipt 10 / 25 / 2017
Transaction ID : A1AED42881F2841E386A
 Amount of Each Receipt this Period 170.00
 Memo Item

B. GRIFFIN, DIONIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3912 KNOX CT
 City BURLINGTON State NC Zip Code 27215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2017
Transaction ID : A609C692F8604426AAC6
 Amount of Each Receipt this Period 250.00
 Memo Item

C. HILLMAN, TATNALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 504 W BLEEKER ST
 City ASPEN State CO Zip Code 81611
 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 ▼ 1000.00

Date of Receipt 10 / 25 / 2017
Transaction ID : A6E79C1385D1E4146976
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1420.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. O'NEIL, CONNIE, C.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3214 N 159TH AVE
 City OMAHA State NE Zip Code 68116-2453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2017
Transaction ID : AE921689CD9964E92AEC
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SNYDER, HELEN, PATRICIA, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 VALLEJO CT
 City MILLBRAE State CA Zip Code 94030-2835
 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 ▼ 600.00

Date of Receipt 10 / 26 / 2017
Transaction ID : A7F334C1A3B3546BC8CB
 Amount of Each Receipt this Period 200.00
 Memo Item

C. BUENING, RICHARD, F.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18660 N HIGHWAY 45
 City EFFINGHAM State IL Zip Code 62401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUENING IMPLEMENT, INC Occupation (for Individual) FARM EQUIP DEAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 26 / 2017
Transaction ID : ACD397C89A927453198F
 Amount of Each Receipt this Period 500.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 96 OF 256
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. STINEBISER, RONALD, G, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1195 LA MOREE RD
SPC 112

City SAN MARCOS State CA Zip Code 92078-4531

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

Name of Employer (for Individual) US NAVY Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 26 / 2017
Transaction ID : A4178D164CA094F58B59

Amount of Each Receipt this Period 100.00

Memo Item

B. BLOOMFIELD, JANET, A, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3878 MUSGROVE RD

City CHILLICOTHE State OH Zip Code 45601-9777

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

Name of Employer (for Individual) GENERAL ELECTRIC RET Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt 10 / 26 / 2017
Transaction ID : A73BBEE40B267403CB7B

Amount of Each Receipt this Period 50.00

Memo Item

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

Mailing Address 1141 WESTERN HILLS RD

City ROCKDALE State TX Zip Code 76567

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

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

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2017
Transaction ID : AF9EDF410CC504457965

Amount of Each Receipt this Period 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. SMALLEY, SYLVIA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 KATHERINE DR
 City WARREN State NJ Zip Code 07059-7011
 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 ▼ 240.00

Date of Receipt 10 / 26 / 2017
Transaction ID : A8CF3A0900CAE45C9A86
 Amount of Each Receipt this Period 30.00
 Memo Item

B. BARTOL, RENEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 GREELEY HILL RD
 City BEDFORD State NH Zip Code 03110-4657
 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 ▼ 260.00

Date of Receipt 10 / 26 / 2017
Transaction ID : AB9EF8B3C8BFA48BF983
 Amount of Each Receipt this Period 35.00
 Memo Item

C. KING, ARTHA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61 W 29TH PL APT 4308
 City EUGENE State OR Zip Code 97405-5114
 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 ▼ 800.00

Date of Receipt 10 / 26 / 2017
Transaction ID : A0DCA11D657E94E1DAE6
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	265.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. SEMLER, SHIRLEY, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1053 CHAMBERS RD
 City HORSEHEADS State NY Zip Code 14845-8948
 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 ▼ 525.00

Date of Receipt 10 / 26 / 2017
Transaction ID : AE2D1C29210C94BBC98D
 Amount of Each Receipt this Period 125.00
 Memo Item

B. RICARD, ROBERT, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 231 INVERNESS PL
 City GLENDORA State CA Zip Code 91741-3940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOS ANGELES CO Occupation (for Individual) RET FIREMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 10 / 26 / 2017
Transaction ID : A4FDA865CD0D84115885
 Amount of Each Receipt this Period 1500.00
 Memo Item

C. PACKARD, DANIEL, B, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8701 SANDRINGHAM AVE
 City LAS VEGAS State NV Zip Code 89129-7258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SILVER RIDGE HEALTH CARE Occupation (for Individual) RESP THERAPIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 26 / 2017
Transaction ID : AE0FBFEB4ECC94B85A61
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1725.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 99 OF 256
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KSINIENWICH, CHARLES, F, MR,		Date of Receipt
Mailing Address 215 AVERY AVE		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2017"/>
City SYRACUSE	State NY	Zip Code 13204-1827
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : AF7194E8DAF2E49939CF
Name of Employer (for Individual) SYRACUSE UNIVERSITY		Occupation (for Individual) RETAIL CLERK
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	Amount of Each Receipt this Period <input type="text" value="100.00"/>
<input type="checkbox"/> Memo Item		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SHOTWELL, DONNA, JEAN, MS.,		Date of Receipt
Mailing Address 1261 PINE CREEK WAY APT B		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2017"/>
City CONCORD	State CA	Zip Code 94520-3645
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A3DB6D74750B148799D5
Name of Employer (for Individual) CHEVRON		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="255.00"/>	Amount of Each Receipt this Period <input type="text" value="40.00"/>
<input type="checkbox"/> Memo Item		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. NIKKEL, JOHN, G, ,		Date of Receipt
Mailing Address 1101 W 84TH ST		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City TULSA	State OK	Zip Code 74132
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A467EF297EF0146A9A75
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="600.00"/>	Amount of Each Receipt this Period <input type="text" value="300.00"/>
<input type="checkbox"/> Memo Item		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="440.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 256
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. MCWILLIAMS, LARRY, R, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5024 ROUNDTREE CT
 City HALTOM CITY State TX Zip Code 76137-2193
 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 ▼ 350.00

Date of Receipt 10 / 27 / 2017
Transaction ID : A5019DBE954474F709ED
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MORRIS, ANNE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8300 SW 84TH ST
 City OKLAHOMA CITY State OK Zip Code 73169
 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 ▼ 325.00

Date of Receipt 10 / 27 / 2017
Transaction ID : A923F760D2F314C2E85A
 Amount of Each Receipt this Period 200.00
 Memo Item

C. GOOS, JEAN, M, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7840 W PAINE AVE
 City LAKEWOOD State CO Zip Code 80235-1920
 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 ▼ 575.00

Date of Receipt 10 / 27 / 2017
Transaction ID : A62D6416D87C64D9A9FD
 Amount of Each Receipt this Period 225.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 256
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. SCOTT, EVA, F, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15830 GOODES BRIDGE RD
 City AMELIA COURT HOUSE State VA Zip Code 23002-4717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OFFICE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 10 / 27 / 2017
Transaction ID : A2568C8133FF2491B99A
 Amount of Each Receipt this Period 250.00
 Memo Item

B. KING, R, LEE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5115 MAIN ST
 City GRASONVILLE State MD Zip Code 21638-1227
 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 ▼ 400.00

Date of Receipt 10 / 27 / 2017
Transaction ID : AC86C3CCFB44B491988D
 Amount of Each Receipt this Period 200.00
 Memo Item

C. DILL, WALTER, S, MR, USN RET
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 752 JONATHON PL
 City ESCONDIDO State CA Zip Code 92027-1810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USN RET Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 10 / 27 / 2017
Transaction ID : A3B27F938544B49AFA3E
 Amount of Each Receipt this Period 50.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 102 OF 256
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. AYERS, HELEN, Z, MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 724 E 1000 NORTH RD

City BEMENT	State IL	Zip Code 61813-3715
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : AE8828A3A380F4075AC2

Amount of Each Receipt this Period
50.00

Memo Item

B. BLACK, FREDDA, L, MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1420 W PINE AVE

City MIDLAND	State TX	Zip Code 79705-6523
-----------------	-------------	------------------------

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 ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : AB7E80239C3C14EE6B92

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address PO BOX 295

City INDEPENDENCE	State CA	Zip Code 93526-0295
----------------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED	Occupation (for Individual) INFORMATION REQUESTED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2017

Transaction ID : AE9880C14A4524F42AD2

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

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

Mailing Address 6764 E HOMER BALTIMORE RD

City HOMER	State NY	Zip Code 13077
---------------	-------------	-------------------

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 ▼
1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2017

Transaction ID : AC7FF64E534254D79BA9

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 28 COMEE ST

City GARDNER	State MA	Zip Code 01440
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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 ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2017

Transaction ID : AFE6975A02FC04A0AB3B

Amount of Each Receipt this Period
300.00

Memo Item

C. RICHARDS, CAROL, H, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 PURSUIT
UNIT 17A

City ALISO VIEJO	State CA	Zip Code 92656-4213
---------------------	-------------	------------------------

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 ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2017

Transaction ID : AD6107FA3F2BA4A7980F

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. SCOTT, DOROTHY, R, MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5105 SEABREEZE WAY
 City OXNARD State CA Zip Code 93035-1054
 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 ▼ 1000.00

Date of Receipt 10 / 30 / 2017
Transaction ID : A801BE13D345848E9AED
 Amount of Each Receipt this Period 500.00
 Memo Item

B. BANKS, ELIZABETH, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1106 N HARVILLE RD
 City DUNCAN State OK Zip Code 73533
 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 ▼ 625.00

Date of Receipt 10 / 30 / 2017
Transaction ID : A4A11C46E07544D06A2A
 Amount of Each Receipt this Period 200.00
 Memo Item

C. BRAUN, JOHN, R, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 JUXON CT
 City BALTIMORE State MD Zip Code 21236
 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 ▼ 1200.00

Date of Receipt 10 / 30 / 2017
Transaction ID : A1AE413B73E4B41FA9C2
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

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

Mailing Address 1055 LITCHFIELD PL

City GALLATIN	State TN	Zip Code 37066-5611
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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 ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2017

Transaction ID : AC868A52DFEA940D0931

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 966 LA RUE AVE

City LA VERNE	State CA	Zip Code 91750
------------------	-------------	-------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED	Occupation (for Individual) INFORMATION REQUESTED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2017

Transaction ID : A6C8E2AD2B7EB40A1A5E

Amount of Each Receipt this Period
100.99

Memo Item

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

Mailing Address 4358 S DEL REY AVE

City DEL REY	State CA	Zip Code 93616-9705
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WATSONVILLE P SCHOOLS	Occupation (for Individual) RET TEACHER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1296.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2017

Transaction ID : A56DD4BB23A0B4D52900

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.99
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. CULPEPPER, ROBERT, C, , MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 525 PARK PLACE DR
 City ALEXANDRIA State LA Zip Code 71301-3947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PREMIER PEDIATRIC CLINIC Occupation (for Individual) PEDIATRICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 10 / 30 / 2017
Transaction ID : AD918C5686DE8470BB75
 Amount of Each Receipt this Period 2500.00
 Memo Item

B. KELLY, ROBERT, V, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 495 LINDA LN
 City FAIRLESS HILLS State PA Zip Code 19030-3807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VOLPE DEDICATED INC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.66

Date of Receipt 10 / 30 / 2017
Transaction ID : AC997586DE165472BA53
 Amount of Each Receipt this Period 118.00
 Memo Item

C. ACKERMAN, MERRILL, M, MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 71
 City EUREKA State SD Zip Code 57437-0071
 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 ▼ 600.00

Date of Receipt 10 / 30 / 2017
Transaction ID : A54E87922598C425BAD5
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2718.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 107 OF 256
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. BERNHOFT, EDWARD, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3276 TOPAZ LN
 City CAMERON PARK State CA Zip Code 95682-8514
 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 ▼ 300.00

Date of Receipt 10 / 31 / 2017
Transaction ID : A186EC13BF1A3459EA7F
 Amount of Each Receipt this Period 75.00
 Memo Item

B. MUNN, ARNOLD, S, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9708 W HAWTHORNE ST
 City CRYSTAL RIVER State FL Zip Code 34428-6111
 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 ▼ 900.00

Date of Receipt 10 / 31 / 2017
Transaction ID : A4518BAE9C02D49929C9
 Amount of Each Receipt this Period 300.00
 Memo Item

C. RITCH, PHILIP, E, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 KALUAMOO ST
 City KAILUA State HI Zip Code 96734-2144
 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 ▼ 370.00

Date of Receipt 10 / 31 / 2017
Transaction ID : AEC4BEC57F0D549DBB68
 Amount of Each Receipt this Period 65.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	440.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. SHEPHERD, BARRY, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2670 60TH AVE SE

City ROCHESTER	State MN	Zip Code 55904
-------------------	-------------	-------------------

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

Name of Employer (for Individual) IBM	Occupation (for Individual) ELECT ENG
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2017

Transaction ID : A5E30861241B147758A8

Amount of Each Receipt this Period
50.00

Memo Item

B. ZIEL, WILLARD, C, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4687 W LOWES CREEK RD

City EAU CLAIRE	State WI	Zip Code 54701-9443
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2017

Transaction ID : A39181D1430A34BBB99A

Amount of Each Receipt this Period
200.00

Memo Item

C. WOLGEMUTH, DONALD, H, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3001 LITITZ PIKE
PO BOX 5093

City LANCASTER	State PA	Zip Code 17606-5093
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2017

Transaction ID : AA3962A89079B4A15AEE

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 256
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. DUNN, WILLIAM, V, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41964 ELSMERE RD
 City AINSWORTH State NE Zip Code 69210-1752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER- RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 11 / 03 / 2017
Transaction ID : A391250E2B5294A628D5
 Amount of Each Receipt this Period 500.00
 Memo Item

B. KELTON, LORRAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2224 SHEFFIELD DR
 City FORT COLLINS State CO Zip Code 80526
 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 ▼ 975.00

Date of Receipt 11 / 03 / 2017
Transaction ID : AED99A850B292457CBC4
 Amount of Each Receipt this Period 300.00
 Memo Item

C. SMITH, S, BERNE, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 N 24TH ST
 City CAMP HILL State PA Zip Code 17011-3602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2017
Transaction ID : A16F4209AE68540289FA
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. GODWIN, JOE, R, CSM, RET
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 PARK AVE
 City FOLEY State AL Zip Code 36535-1136
 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 ▼ 655.00

Date of Receipt 11 / 03 / 2017
Transaction ID : A8AEB7FB4DE424A7BAD
 Amount of Each Receipt this Period 150.00
 Memo Item

B. REYNOLDS, MARY, S, MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4200 GLENARM RD
 City CRESTWOOD State KY Zip Code 40014-8976
 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 ▼ 455.00

Date of Receipt 11 / 03 / 2017
Transaction ID : AE59C1273FFA243EBBA2
 Amount of Each Receipt this Period 65.00
 Memo Item

C. STRASSBURG, ALTA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1015 YUMA LN N
 City PLYMOUTH State MN Zip Code 55447
 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 ▼ 280.00

Date of Receipt 11 / 03 / 2017
Transaction ID : A6360FA925C72412F979
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. CARUSO, JOEY, W, MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2521 METAIRIE HEIGHTS AVE
 City METAIRIE State LA Zip Code 70002
 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 ▼ 280.16

Date of Receipt 11 / 04 / 2017
Transaction ID : A3086D74E6C0247FEA29
 Amount of Each Receipt this Period 25.00
 Memo Item

B. SAND, GINNY, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22720 CAVALIER ST
 City WOODLAND HILLS State CA Zip Code 91364
 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 ▼ 400.00

Date of Receipt 11 / 05 / 2017
Transaction ID : A0283D5DD7F6446729C2
 Amount of Each Receipt this Period 75.00
 Memo Item

C. COX, PHILIP, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4917 TENNESSEE AVE
 City CHATTANOOGA State TN Zip Code 37409
 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 ▼ 400.00

Date of Receipt 11 / 05 / 2017
Transaction ID : A24E97A137414413DBC3
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. PRAEGER, DOROTHY, A, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 59 SAN BENITO WAY
 City SAN FRANCISCO State CA Zip Code 94127-1501
 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 ▼ 420.00

Date of Receipt 11 / 06 / 2017
Transaction ID : A4E61BC82737947B5A8C
 Amount of Each Receipt this Period 100.00
 Memo Item

B. TURNER, CHARLES, D, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 86 SEALS RD
 City DALLAS State GA Zip Code 30157-6736
 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 ▼ 225.00

Date of Receipt 11 / 06 / 2017
Transaction ID : A16EDDD1F45D34115989
 Amount of Each Receipt this Period 30.00
 Memo Item

C. TEAL, TRACY, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 E 9TH AVE
 City JOHNSON CITY State TN Zip Code 37601-3907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 06 / 2017
Transaction ID : AC7CE481F233846559D3
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	230.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. GEISLER, ELLEN, S, MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 158 PROTECTORY RD

City ABBOTTSTOWN	State PA	Zip Code 17301-8987
---------------------	-------------	------------------------

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

Name of Employer (for Individual) ENGLE PRINTING COMPANY	Occupation (for Individual) DELIVERY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

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

Transaction ID : AE30E196AB4C54E059C0

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 3715 LYNWOOD WAY

City SACRAMENTO	State CA	Zip Code 95864
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2017

Transaction ID : A03F40021E0E643EF950

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 698 EATON ST

City MEMPHIS	State TN	Zip Code 38120
-----------------	-------------	-------------------

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 ▼
2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2017

Transaction ID : A2F38FD4462924C5FAF5

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. GUTHRIE, PHILIP, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23755 MIDDLEBELT RD
 City FARMINGTON HILLS State MI Zip Code 48336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FORD MOTOR COMPANY Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2017
Transaction ID : AF4BBB146B6604BC998D
 Amount of Each Receipt this Period 100.00
 Memo Item

B. NEWSOM, BARRY, D, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2515 YORKTOWN DR
 City TUSCALOOSA State AL Zip Code 35406-1662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIMPSON NEWSOM CARDIOVASC Occupation (for Individual) CV SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 11 / 07 / 2017
Transaction ID : A71FD684B206F434EBDB
 Amount of Each Receipt this Period 100.00
 Memo Item

C. EICHENBERGER, RUDOLPH, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1908 LACARI
 City MAGNOLIA State AR Zip Code 71753
 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 ▼ 335.00

Date of Receipt 11 / 07 / 2017
Transaction ID : A3225183D4D4D42AAAF8
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. GRISHAM, THERESA, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 322
 City ATTICA State IN Zip Code 47918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2017
Transaction ID : AD31BECFEED64046B4E
 Amount of Each Receipt this Period 50.00
 Memo Item

B. LIVACICH, JOHN, A, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1004 W CRESCENT AVE
 City REDLANDS State CA Zip Code 92373-6649
 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 ▼ 308.00

Date of Receipt 11 / 07 / 2017
Transaction ID : A21A00D4361654F28BC0
 Amount of Each Receipt this Period 89.00
 Memo Item

C. WOODLE, BOYD, M, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1061 OAKWOOD CT
 City IRWIN State PA Zip Code 15642-2218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 08 / 2017
Transaction ID : A4DE3A2F705744306823
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	189.00
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 116 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. FOX, STEPHEN, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3450 DULUTH PARK LN

City DULUTH	State GA	Zip Code 30096-3257
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

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

Transaction ID : ADD298F0B2F4F4E9F819

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 972 E CAMINO DIESTRO

City TUCSON	State AZ	Zip Code 85704
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

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

Transaction ID : A9A9323965E75461A955

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 3450 DULUTH PARK LN

City DULUTH	State GA	Zip Code 30096-3257
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

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

Transaction ID : A8FE0D5CBC4304FF2A04

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. WELLS, KEITHA, K, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3911 APPALACHIAN TRL

City KINGWOOD	State TX	Zip Code 77345-1022
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		09		2017

Transaction ID : AC86D6AAF1CCB4026A96

Amount of Each Receipt this Period
150.00

Memo Item

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

Mailing Address 2670 60TH AVE SE

City ROCHESTER	State MN	Zip Code 55904
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IBM	Occupation (for Individual) ELECT ENG
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		10		2017

Transaction ID : AE34458575A2746C0A1B

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 545 BENNETT ST

City LUZERNE	State PA	Zip Code 18709
-----------------	-------------	-------------------

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

Name of Employer (for Individual) BARNES KASSON HOSPITAL	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		10		2017

Transaction ID : A558440C00225438CBF5

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. HENDERSON, ROBERT, WEBB, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 946 QUALITY DR
 PO BOX 100
 City LANCASTER State SC Zip Code 29721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NUTRAMAX LABORATORIES Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 10 / 2017
Transaction ID : A19F1B339B54044B8B04
 Amount of Each Receipt this Period 500.00
 Memo Item

B. REDMAN, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 40
 City ATHOL State ID Zip Code 83801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IDAHO STATE Occupation (for Individual) STATE REPRESENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 10 / 2017
Transaction ID : A30B001F3B46246F0953
 Amount of Each Receipt this Period 250.00
 Memo Item

C. DHANSE, CATHERINE, A, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 DONNAN AVE
 APT E9
 City WASHINGTON State PA Zip Code 15301-6558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINK CHERO & REHAB Occupation (for Individual) CHIRO ASSISTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 576.00

Date of Receipt 11 / 10 / 2017
Transaction ID : A358043587C5944EF86B
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 785.00
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 119 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. PRITCHARD, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 322
 City NACHES State WA Zip Code 98937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BEEKEEPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 10 / 2017
Transaction ID : A62DD6307D66D4318B52
 Amount of Each Receipt this Period 250.00
 Memo Item

B. ST CLAIR, ANNE, K, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8900 INGLESIDE FARM LN
 City MECHANICSVILLE State VA Zip Code 23111-2600
 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 ▼ 479.66

Date of Receipt 11 / 10 / 2017
Transaction ID : AB8F30DF181F340CFB37
 Amount of Each Receipt this Period 250.00
 Memo Item

C. LESLIE, WILLIAM, F, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 STARFLOWER DR
 City GRIFFIN State GA Zip Code 30223-5799
 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 ▼ 1400.00

Date of Receipt 11 / 10 / 2017
Transaction ID : A852EFFD90EFA4EF1B76
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

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

Mailing Address 949 RIVER ST

City GASSAWAY	State WV	Zip Code 26624-1183
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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 ▼
241.86

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	10	/	2017

Transaction ID : AE44A249FA65D48AEB0E

Amount of Each Receipt this Period
20.18

Memo Item

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

Mailing Address 107 HILLTOP RD

City BLOOMINGTON	State IL	Zip Code 61701
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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 ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	12	/	2017

Transaction ID : A615836E5EAF449758AB

Amount of Each Receipt this Period
35.00

Memo Item

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

Mailing Address 29 SAGE DR

City WARWICK	State RI	Zip Code 02886
-----------------	-------------	-------------------

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

Name of Employer (for Individual) N PRODUCTS CORP	Occupation (for Individual) VICE CHAIRMAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2017

Transaction ID : AE38363E50CB44DB0B99

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	555.18
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 121 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

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

Mailing Address 949 RIVER ST

City GASSAWAY	State WV	Zip Code 26624-1183
------------------	-------------	------------------------

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 ▼
261.86

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2017

Transaction ID : A0A57768BF02648C0A9F

Amount of Each Receipt this Period
20.00

Memo Item

B. TAYLOR, WILFORD, , MR, III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 898

City CANYON	State TX	Zip Code 79015-0898
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2017

Transaction ID : A6F48D94BC1C94F2EA2F

Amount of Each Receipt this Period
100.00

Memo Item

C. SHOTWELL, DONNA, JEAN, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1261 PINE CREEK WAY
APT B

City CONCORD	State CA	Zip Code 94520-3645
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2017

Transaction ID : A07A7E93FDBDD46CF82C

Amount of Each Receipt this Period
40.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 256
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. MONTGOMERY, BEBE, JEAN, MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12410 W CORONET DR
 City SUN CITY WEST State AZ Zip Code 85375-5122
 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 ▼ 275.00

Date of Receipt 11 / 14 / 2017
Transaction ID : AF29BAA2E74BF4CF2AB4
 Amount of Each Receipt this Period 50.00
 Memo Item

B. COOPER, JAMES, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 534 NITA DR
 City FULTON State MS Zip Code 38843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TUPELO ANESTHESIA GROUP Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 14 / 2017
Transaction ID : A3E2A562CF56B4D71B8F
 Amount of Each Receipt this Period 250.00
 Memo Item

C. BLOOMFIELD, JANET, A, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3878 MUSGROVE RD
 City CHILLICOTHE State OH Zip Code 45601-9777
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL ELECTRIC RET Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 645.00

Date of Receipt 11 / 14 / 2017
Transaction ID : A0596F1E78F4C47A487F
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. GUILLAUDEU, LOUISE, L, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1414 S DOVER WAY
 City LAKEWOOD State CO Zip Code 80232-5253
 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 ▼ 250.00

Date of Receipt 11 / 15 / 2017
Transaction ID : AB8FE8026BFDB46308FE
 Amount of Each Receipt this Period 25.00
 Memo Item

B. RITCH, PHILIP, E, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 KALUAMOO ST
 City KAILUA State HI Zip Code 96734-2144
 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 ▼ 390.00

Date of Receipt 11 / 15 / 2017
Transaction ID : A0BE7E2DA2FD54999B24
 Amount of Each Receipt this Period 20.00
 Memo Item

C. BARTOL, RENEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 GREELEY HILL RD
 City BEDFORD State NH Zip Code 03110-4657
 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 ▼ 280.18

Date of Receipt 11 / 15 / 2017
Transaction ID : ADF34D984B6664E94B2F
 Amount of Each Receipt this Period 20.18
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	65.18
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 124 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. MIDDLETON, DALE, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 47810 PINECREST DR
 City SHELBY TOWNSHIP State MI Zip Code 48317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FORD MOTOR COMAPNY Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 15 / 2017
Transaction ID : A48D0AAFA6829473FBD5
 Amount of Each Receipt this Period 250.00
 Memo Item

B. KELLY, ROBERT, V, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 495 LINDA LN
 City FAIRLESS HILLS State PA Zip Code 19030-3807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VOLPE DEDICATED INC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 387.66

Date of Receipt 11 / 16 / 2017
Transaction ID : A9B4C661283AD4D38A69
 Amount of Each Receipt this Period 87.00
 Memo Item

C. DHANSE, CATHERINE, A, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 DONNAN AVE APT E9
 City WASHINGTON State PA Zip Code 15301-6558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINK CHERO & REHAB Occupation (for Individual) CHIRO ASSISTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 626.00

Date of Receipt 11 / 16 / 2017
Transaction ID : A8D80F46924784DF88FD
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	387.00
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 125 OF 256
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. NEIL, PATRICIA, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21657 BEAUFORD LN
 City NORTHVILLE State MI Zip Code 48167
 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 ▼ 225.00

Date of Receipt 11 / 17 / 2017
Transaction ID : A66858D5EC160407FB3E
 Amount of Each Receipt this Period 150.00
 Memo Item

B. REMINGTON, JAMES, A, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2671 TRELIS GREEN CIR
 City HENRICO State VA Zip Code 23233-6984
 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 ▼ 6500.00

Date of Receipt 11 / 17 / 2017
Transaction ID : A66425D20A259428287D
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. VALERIUS, JOHN, B, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1909 CANTERBURY ST
 City IRVING State TX Zip Code 75062-3551
 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 ▼ 9100.00

Date of Receipt 11 / 17 / 2017
Transaction ID : AD3EBC70DCFC54D74A20
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. PERSONIUS, BRADLEY, E, DR., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 SERENITY LN
 City GRANTS PASS State OR Zip Code 97526-9756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHERN OREGON CARDIOLOG Occupation (for Individual) CARDIOLOGIST
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 400.00

Date of Receipt 11 / 17 / 2017
Transaction ID : A44A4C9A575FD4B67A1F
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CARTER, JAY, W, MR, JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2730 COMMERCE ST STE 500
 City WICHITA FALLS State TX Zip Code 76301-8000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARTER AVIATION Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 11 / 17 / 2017
Transaction ID : AF72489387BC840D7974
 Amount of Each Receipt this Period 25.00
 Memo Item

C. SMITH, MANIS, J, , JR PHD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 MCCARVER DR
 City GADSDEN State AL Zip Code 35901-8921
 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 400.00

Date of Receipt 11 / 17 / 2017
Transaction ID : A4CEBABD0C4E3411EBB5
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... 275.00
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

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

Mailing Address 3 CHECKERED FLAG BLVD

City SHAKOPEE	State MN	Zip Code 55379
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

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

Transaction ID : A29DC0178A710471683A

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 622 N DARTMOUTH RD

City SPOKANE VALLEY	State WA	Zip Code 99206-3821
------------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

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

Transaction ID : A58E54E4E81DD4976A32

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 11 JAMES

City ALMA	State NE	Zip Code 68920
--------------	-------------	-------------------

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

Name of Employer (for Individual) ALMA PUBLIC SCHOOL	Occupation (for Individual) TEACHER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

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

Transaction ID : AB572C251C31E4D2C9AD

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. MCGEE, THOMAS, P, MR, JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 LONGVIEW CT
 City FRANKLIN State NC Zip Code 28734-2800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 11 / 17 / 2017
Transaction ID : AB613E1690374485E8AE
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. DOORNBOS, J, FRED, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1275 W FOREVERGREEN RD APT 226
 City NORTH LIBERTY State IA Zip Code 52317-8535
 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 ▼ 220.00

Date of Receipt 11 / 17 / 2017
Transaction ID : A84F8900F7AB146A9944
 Amount of Each Receipt this Period 50.00
 Memo Item

C. GARCIA, ESPERANZA, G, MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 94-405 IKEPONO ST
 City WAIPAHU State HI Zip Code 96797-1619
 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 ▼ 400.00

Date of Receipt 11 / 20 / 2017
Transaction ID : A42619F88BDB2452D81D
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1150.00
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 129 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. DOUGLASS, DONALD, J, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8961 LAKE DR
APT 306

City CAPE CANAVERAL State FL Zip Code 32920-5507

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 ▼
700.00

Date of Receipt
11 / 20 / 2017
Transaction ID : **A93CAFAE1588A4FE096B**

Amount of Each Receipt this Period
100.00

Memo Item

B. MUNN, ARNOLD, S, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9708 W HAWTHORNE ST

City CRYSTAL RIVER State FL Zip Code 34428-6111

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 ▼
1200.00

Date of Receipt
11 / 20 / 2017
Transaction ID : **AA23BBB63714A45D9B08**

Amount of Each Receipt this Period
300.00

Memo Item

C. HERBERT, DOROTHY, L, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 5294

City AUGUSTA State ME Zip Code 04332-5294

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 ▼
400.00

Date of Receipt
11 / 20 / 2017
Transaction ID : **A4E9744AFDF9E43B9803**

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

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

Mailing Address 55 DINSMORE AVE
APT 608

City FRAMINGHAM State MA Zip Code 01702-6028

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 ▼
670.00

Date of Receipt
11 / 20 / 2017
Transaction ID : A09C7E1F58D104409B59

Amount of Each Receipt this Period
225.00

Memo Item

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

Mailing Address 2801 ADAMS STREET
APT 65

City RIVERSIDE State CA Zip Code 92504

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 ▼
225.00

Date of Receipt
11 / 20 / 2017
Transaction ID : A11F4A5FDD4FA4482BBD

Amount of Each Receipt this Period
100.00

Memo Item

C. FRIEDRICH, JOSEPH, H, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8045 ADAM CT

City GRANITE BAY State CA Zip Code 95746-9588

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 ▼
325.00

Date of Receipt
11 / 20 / 2017
Transaction ID : A7172549B43664DFEBC5

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	375.00
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 131 OF 256
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. SEEGER, MARCIA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3053 COLETTE DR
 City SAN PABLO State CA Zip Code 94806-2712
 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 ▼ 247.00

Date of Receipt 11 / 20 / 2017
Transaction ID : A7FAD60A5F5E14530A56
 Amount of Each Receipt this Period 53.00
 Memo Item

B. DEEGAN, EDITH, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25651 WHISPERING TREES WAY
 City VALENCIA State CA Zip Code 91355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HOUSEWIFE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 20 / 2017
Transaction ID : AFE1006EE80554891A8B
 Amount of Each Receipt this Period 150.00
 Memo Item

C. MCGREGOR, LARRY, L, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7425 E PRINCESS BLVD UNIT 1027
 City SCOTTSDALE State AZ Zip Code 85255-5124
 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 ▼ 350.00

Date of Receipt 11 / 20 / 2017
Transaction ID : AA76D42BE9E334566A95
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	303.00
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 132 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. MELCHER, LOUISE, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10785 CHERRY HILL DR

City SAN DIEGO	State CA	Zip Code 92130
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SAHM	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2017

Transaction ID : ABE979635B16041ECBD1

Amount of Each Receipt this Period
50.00

Memo Item

B. DOTINGA, JAMES, W, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4026 SALT SPRING DR

City FERNDALE	State WA	Zip Code 98248-9538
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2017

Transaction ID : A8260FC084C0C4A92A4D

Amount of Each Receipt this Period
50.00

Memo Item

C. SHOTWELL, DONNA, JEAN, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1261 PINE CREEK WAY
APT B

City CONCORD	State CA	Zip Code 94520-3645
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2017

Transaction ID : A9A5B7DF4D90F4FC28D0

Amount of Each Receipt this Period
40.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	140.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. SECORD, CYNTHIA, A, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 95 BEAMAN RD

City STERLING	State MA	Zip Code 01564-2703
------------------	-------------	------------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2017

Transaction ID : A81697D0BFBBF4B7580A

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 1004 W CRESCENT AVE

City REDLANDS	State CA	Zip Code 92373-6649
------------------	-------------	------------------------

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 ▼
397.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2017

Transaction ID : A5601173D4141496F9E4

Amount of Each Receipt this Period
89.00

Memo Item

C. THOMS, NORMAN, W, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5420 SE 37TH ST

City TECUMSEH	State KS	Zip Code 66542-9161
------------------	-------------	------------------------

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 ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2017

Transaction ID : AB37DDE677B2045D5BCD

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	169.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 256
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. TEETS, JOHN, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 949 RIVER ST
 City GASSAWAY State WV Zip Code 26624-1183
 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 ▼ 271.86

Date of Receipt 11 / 20 / 2017
Transaction ID : A8B64CEA9BB604CAAAB
 Amount of Each Receipt this Period 10.00
 Memo Item

B. KUBIN, DANIEL, D, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 BLOUNT ST
 City HOUSTON State TX Zip Code 77008-4441
 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 ▼ 600.00

Date of Receipt 11 / 20 / 2017
Transaction ID : A04962529D36E467A8C0
 Amount of Each Receipt this Period 200.00
 Memo Item

C. CULPEPPER, ROBERT, C, , MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 525 PARK PLACE DR
 City ALEXANDRIA State LA Zip Code 71301-3947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PREMIER PEDIATRIC CLINIC Occupation (for Individual) PEDIATRICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 8500.00

Date of Receipt 11 / 20 / 2017
Transaction ID : AE62F2D322C9846CE988
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1210.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. PRAEGER, DOROTHY, A, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 59 SAN BENITO WAY

City SAN FRANCISCO	State CA	Zip Code 94127-1501
-----------------------	-------------	------------------------

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 ▼
445.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2017

Transaction ID : A746ACFF70D514781928

Amount of Each Receipt this Period
25.00

Memo Item

B. STEVENS, CARL, EDWIN, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 29358 N COUNTY ROAD 3180

City ELMORE CITY	State OK	Zip Code 73433-9052
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2017

Transaction ID : A82D2280C94D149ADB61

Amount of Each Receipt this Period
100.00

Memo Item

C. KEIL, EDWARD, O, , TRUSTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 401 E ATLANTIC AVE
KINGS RUN SUITE 215

City HADDON HEIGHTS	State NJ	Zip Code 08035
------------------------	-------------	-------------------

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 ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2017

Transaction ID : A9289344C91104423884

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. CLARK, MARY, E, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9317 S 390 E

City LA FONTAINE	State IN	Zip Code 46940-9072
---------------------	-------------	------------------------

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 ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		20		2017

Transaction ID : AFA40AF9A5DA64CE285C

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address PO BOX 458

City INDIANOLA	State WA	Zip Code 98342
-------------------	-------------	-------------------

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

Name of Employer (for Individual) CONNEX SOLUTIONS	Occupation (for Individual) CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		20		2017

Transaction ID : A930D384D6CCA44B4AB0

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 1241 VIA CORONEL

City PALOS VERDES ESTATES	State CA	Zip Code 90274-1952
------------------------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED	Occupation (for Individual) INFORMATION REQUESTED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		20		2017

Transaction ID : AB59F712E27EC4551965

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	575.00
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 137 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. WIEGAND, EDWARD, W, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 75 CAYMAN ISLES BLVD

City ENGLEWOOD	State FL	Zip Code 34223-1832
-------------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED	Occupation (for Individual) INFORMATION REQUESTED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		20		2017

Transaction ID : A947B61364C28425D901

Amount of Each Receipt this Period
150.00

Memo Item

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

Mailing Address 2905 POPLAR BLVD

City ALHAMBRA	State CA	Zip Code 91803-1017
------------------	-------------	------------------------

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 ▼
375.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		20		2017

Transaction ID : AF11F2B2731CD4030B9D

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 403 W MAIN ST

City SILVER LAKE	State IN	Zip Code 46982
---------------------	-------------	-------------------

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

Name of Employer (for Individual) WARSAWCOMMUNITYHIGHSCHOOL	Occupation (for Individual) CASHIER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		20		2017

Transaction ID : AE81DCF4A07354C42B76

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 256
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. MCDOWELL, PATRICIA, A, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2308 DOUGLAS DR

City CARLISLE	State PA	Zip Code 17013-1094
------------------	-------------	------------------------

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 ▼
350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		20		2017

Transaction ID : AE856D5F061584439A2F

Amount of Each Receipt this Period
100.00

Memo Item

B. ACKERMAN, MERRILL, M, MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 71

City EUREKA	State SD	Zip Code 57437-0071
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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 ▼
700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		21		2017

Transaction ID : AC9DB95A070B44EC4BCA

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 80 WILLOWBROOK RD

City SURPRISE	State NY	Zip Code 12176-2301
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		21		2017

Transaction ID : A164A1C809A134C7D8E4

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 256
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. MAY, JANICE, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5900 LOCH LOMOND DR

City PLANO	State TX	Zip Code 75093
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2017

Transaction ID : AB679A1CB96B24BDEB12

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 3450 DULUTH PARK LN

City DULUTH	State GA	Zip Code 30096-3257
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2017

Transaction ID : A1FA1BA98E91E4BF6A28

Amount of Each Receipt this Period
25.00

Memo Item

C. EYESTONE, MAYNARD, M, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2803 E WINGER RD

City MEAD	State WA	Zip Code 99021
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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 ▼
360.00

Date of Receipt

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

Transaction ID : AC3488AB98273431B8DB

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	545.00
TOTAL This Period (last page this line number only).....	108758.51

**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 140 OF 256
<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)
STARS AND STRIPES FOREVER PAC

A. OMEGA LIST COMPANY

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

Mailing Address 1420 SPRING HILL ROAD
SUITE 490

City MCLEAN State VA Zip Code 22102

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 ▼
44897.76

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 13 / 2017

Transaction ID : A7168B78233E44A9D9A4

Amount of Each Receipt this Period
14636.37

Memo Item
LIST RENTAL

B. OMEGA LIST COMPANY

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

Mailing Address 1420 SPRING HILL ROAD
SUITE 490

City MCLEAN State VA Zip Code 22102

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 ▼
55217.01

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2017

Transaction ID : A9A66EA374FE24EF085C

Amount of Each Receipt this Period
10319.25

Memo Item
LIST RENTAL

C. OMEGA LIST COMPANY

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

Mailing Address 1420 SPRING HILL ROAD
SUITE 490

City MCLEAN State VA Zip Code 22102

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 ▼
70198.47

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2017

Transaction ID : A9F608DC64BB94F44835

Amount of Each Receipt this Period
14981.46

Memo Item
LIST RENTAL

SUBTOTAL of Receipts This Page (optional).....	39937.08
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 141 OF 256
<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)
STARS AND STRIPES FOREVER PAC

A. OMEGA LIST COMPANY

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

Mailing Address 1420 SPRING HILL ROAD
SUITE 490

City MCLEAN State VA Zip Code 22102

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 ▼
79083.85

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2017

Transaction ID : A918F3FB9BA37465F8A8

Amount of Each Receipt this Period
 8885.38

Memo Item
LIST RENTAL

B.

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

C.

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	8885.38
TOTAL This Period (last page this line number only).....▶	48822.46

**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 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)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City VIENNA State VT Zip Code 22182

Purpose of Disbursement
COMPLIANCE SOFTWARE

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B567F2D334:
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. DESERT FOX STRATEGIC COMMUNICATIONS

Mailing Address 5841 E CHARLESTON BLVD
SUITE 230-226

City MT REAGAN State NV Zip Code 89142

Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BEB3F071C4:
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. SOUSA, JOHN, P, , IV

Mailing Address 11-C TALCOTT FOREST RD
UNIT C

City FARMINGTON State CT Zip Code 06032

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B2FA1FB8E:
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial) A. ATKINSON, MAURICE, , ,		Date of Disbursement MM / DD / YYYY 07 / 14 / 2017	
Mailing Address 695 FRIAR TUCK LN		FEC Identification Number C [REDACTED] Transaction ID : B50779A97B! Amount of Each Disbursement this Period [REDACTED] 750.00	
City MACON	State GA	Zip Code 31220	Category/ Type [REDACTED]
Purpose of Disbursement SOCIAL MEDIA 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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. SARACINO, WILLIAM, , ,		Date of Disbursement MM / DD / YYYY 07 / 14 / 2017	
Mailing Address 3625 ANGELUS AVE		FEC Identification Number C [REDACTED] Transaction ID : BCF97DD5B4 Amount of Each Disbursement this Period [REDACTED] 1000.00	
City GLENDALE	State CA	Zip Code 91208	Category/ Type [REDACTED]
Purpose of Disbursement POLITICAL STRATEGY 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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. OMEGA LIST COMPANY		Date of Disbursement MM / DD / YYYY 07 / 17 / 2017	
Mailing Address 1420 SPRING HILL ROAD SUITE 490		FEC Identification Number C [REDACTED] Transaction ID : BA9D77FEA! Amount of Each Disbursement this Period [REDACTED] 1336.90	
City MCLEAN	State VA	Zip Code 22102	Category/ Type [REDACTED]
Purpose of Disbursement FUNDRAISING LIST RENTAL		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 3086.90
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial)

A. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City
CHANTILLY

State
VA

Zip Code
20151

Purpose of Disbursement
DONATION PROCESSING, CAGING, BOOKKEEPING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 17 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : B6510FF9231

Amount of Each Disbursement this Period

[REDACTED] 1510.39

Memo Item

Full Name (Last, First, Middle Initial)

B. SISK FULFILLMENT SERVICES

Mailing Address 1900 INDUSTRIAL PARK DR.

City
FEDERLSBURG

State
MD

Zip Code
21632

Purpose of Disbursement
FUNDRAISING PRINTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 17 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : BB23F3C0DD

Amount of Each Disbursement this Period

[REDACTED] 35.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SAVANNA COMMUNICATIONS

Mailing Address 755 SONNE DRIVE

City
ANNAPOLIS

State
MD

Zip Code
21401-7120

Purpose of Disbursement
ISSUE ADVERTISEMENT PRODUCTION/PLACEMENT

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 17 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : B6404D8D3A

Amount of Each Disbursement this Period

[REDACTED] 2125.00

Memo Item

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

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

[REDACTED] 3670.39

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial)

A. INTERNATIONAL DATA MANAGEMENT, INC.

Date of Disbursement

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

Mailing Address 3200 WEST MARKET ST. SUITE 302

FEC Identification Number

C [REDACTED]

Transaction ID : BA39673E60'
Amount of Each Disbursement this Period

[REDACTED] 437.90

Memo Item

City AKRON State OH Zip Code 44333

Purpose of Disbursement
DIRECT MAIL THANK YOU PRINTING

[REDACTED]

Candidate Name

Category/Type

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

Full Name (Last, First, Middle Initial)

B. EBERLE COMMUNICATIONS GROUP

Date of Disbursement

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

Mailing Address 1420 SPRING HILL ROAD SUITE 490

FEC Identification Number

C [REDACTED]

Transaction ID : BEB04E6A4B
Amount of Each Disbursement this Period

[REDACTED] 2039.96

Memo Item

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement
DIRECT MAIL DATA CENTER

[REDACTED]

Candidate Name

Category/Type

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

Full Name (Last, First, Middle Initial)

C. ADP

Date of Disbursement

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

Mailing Address 2812 EMERYWOOD PARKWAY

FEC Identification Number

C [REDACTED]

Transaction ID : B244BDD56C
Amount of Each Disbursement this Period

[REDACTED] 97.38

Memo Item

City RICHMOND State VA Zip Code 23294

Purpose of Disbursement
PAYROLL SERVICE FEE

[REDACTED]

Candidate Name

Category/Type

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

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

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

[REDACTED] 2575.24

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial) A. WILLIAM J. OLSON, P.C.		Date of Disbursement MM / DD / YYYY 07 / 26 / 2017
Mailing Address 370 MAPLE AVENUE WEST SUITE 4		FEC Identification Number C [REDACTED] Transaction ID : B771A7283DI Amount of Each Disbursement this Period [REDACTED] 1387.50
City VIENNA	State VA	Zip Code 22180-5615
Purpose of Disbursement LEGAL FEES		Category/Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. HUCKABY DAVIS LISKER		Date of Disbursement MM / DD / YYYY 07 / 26 / 2017
Mailing Address 228 S WASHINGTON STREET SUITE 115		FEC Identification Number C [REDACTED] Transaction ID : B498D651EF2 Amount of Each Disbursement this Period [REDACTED] 2750.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement FEC COMPLIANCE AND ACCOUNTING		Category/Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. COLORTREE GROUP INC		Date of Disbursement MM / DD / YYYY 07 / 31 / 2017
Mailing Address 8000 VILLA PARK DR		FEC Identification Number C [REDACTED] Transaction ID : B06B07E674 Amount of Each Disbursement this Period [REDACTED] 48.46
City RICHMOND	State VA	Zip Code 23228-6500
Purpose of Disbursement FUNDRAISING DIRECT MAIL PRINTING		Category/Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 4185.96
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. SOUSA, JOHN, P, , IV

Full Name (Last, First, Middle Initial)

Mailing Address 11-C TALCOTT FOREST RD
UNIT C

City FARMINGTON State CT Zip Code 06032

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 31 / 2017

FEC Identification Number: C

Transaction ID : B7F54FCC02

Amount of Each Disbursement this Period: 3500.00

Memo Item

B. ATKINSON, MAURICE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 695 FRIAR TUCK LN

City MACON State GA Zip Code 31220

Purpose of Disbursement SOCIAL MEDIA CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 31 / 2017

FEC Identification Number: C

Transaction ID : B79D0DF0CE

Amount of Each Disbursement this Period: 750.00

Memo Item

C. PINKSTON GROUP

Full Name (Last, First, Middle Initial)

Mailing Address 5270 SHAWNEE ROAD SUITE 102

City ALEXANDRIA State VA Zip Code 22312

Purpose of Disbursement PUBLIC RELATIONS AND WEBSITE MAINTENANCE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 07 / 2017

FEC Identification Number: C

Transaction ID : B030E3F325

Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5250.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial)

A. CAMPAIGN FUNDING DIRECT

Mailing Address 1420 SPRING HILL ROAD, SUITE 490

Date of Disbursement

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

City MCLEAN State VA Zip Code 22102-3028

FEC Identification Number

C [Redacted]
Transaction ID : BC9064E091/
 Amount of Each Disbursement this Period
 [Redacted] 5190.87

Purpose of Disbursement
FUNDRAISING CREATIVE COPY/POSTAGE

[Redacted]
Category/Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

B. HUCKABY DAVIS LISKER

Mailing Address 228 S WASHINGTON STREET SUITE 115

Date of Disbursement

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

City ALEXANDRIA State VA Zip Code 22314

FEC Identification Number

C [Redacted]
Transaction ID : B824AEDADE
 Amount of Each Disbursement this Period
 [Redacted] 550.00

Purpose of Disbursement
FEC COMPLIANCE AND ACCOUNTING

[Redacted]
Category/Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

C. SAVANNA COMMUNICATIONS

Mailing Address 755 SONNE DRIVE

Date of Disbursement

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

City ANNAPOLIS State MD Zip Code 21401-7120

FEC Identification Number

C [Redacted]
Transaction ID : B11059503BI
 Amount of Each Disbursement this Period
 [Redacted] 3500.00

Purpose of Disbursement
GENERAL MEDIA CONSULTING

[Redacted]
Category/Type

Candidate Name

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

Memo Item

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

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

[Redacted] 9240.87
 [Redacted]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial)

A. EBERLE COMMUNICATIONS GROUP

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement
DIRECT MAIL DATA CENTER

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 14 / 2017

FEC Identification Number

C
Transaction ID : B689CF718C
Amount of Each Disbursement this Period
5140.11

Memo Item

Full Name (Last, First, Middle Initial)

B. SAVANNA COMMUNICATIONS

Mailing Address 755 SONNE DRIVE

City ANNAPOLIS State MD Zip Code 21401-7120

Purpose of Disbursement
ISSUE ADVERTISEMENT PRODUCTION/PLACEMENT

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 14 / 2017

FEC Identification Number

C
Transaction ID : BE7F0915D5/
Amount of Each Disbursement this Period
500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DESERT FOX STRATEGIC COMMUNICATIONS

Mailing Address 5841 E CHARLESTON BLVD
SUITE 230-226

City MT REAGAN State NV Zip Code 89142

Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2017

FEC Identification Number

C
Transaction ID : B361263B3E
Amount of Each Disbursement this Period
1000.00

Memo Item

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

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

6640.11

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. SOUSA, JOHN, P, , IV

Full Name (Last, First, Middle Initial)

Mailing Address 11-C TALCOTT FOREST RD
UNIT C

City FARMINGTON State CT Zip Code 06032

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 15 / 2017

FEC Identification Number: C

Transaction ID : BFFA25E93A

Amount of Each Disbursement this Period: 3500.00

Memo Item

B. ATKINSON, MAURICE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 695 FRIAR TUCK LN

City MACON State GA Zip Code 31220

Purpose of Disbursement SOCIAL MEDIA CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 15 / 2017

FEC Identification Number: C

Transaction ID : BAF2227EBA

Amount of Each Disbursement this Period: 750.00

Memo Item

C. SARACINO, WILLIAM, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3625 ANGELUS AVE

City GLENDALE State CA Zip Code 91208

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 15 / 2017

FEC Identification Number: C

Transaction ID : B4844E0F2F

Amount of Each Disbursement this Period: 1500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5750.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 2812 EMERYWOOD PARKWAY

City RICHMOND State VA Zip Code 23294

Purpose of Disbursement
PAYROLL SERVICE FEE

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BCE96F7E1D
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. PARAMOUNT COMMUNICATIONS

Mailing Address 525-K EAST MARKET STREET SUITE 114

City LEESBURG State VA Zip Code 20176

Purpose of Disbursement
FUNDRAISING EMAIL DISTRIBUTION SERVICE

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B4B4772B35!
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. HUCKABY DAVIS LISKER

Mailing Address 228 S WASHINGTON STREET
SUITE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FEC COMPLIANCE AND ACCOUNTING

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BD23E8A638
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial)

A. RST MARKETING

Mailing Address 1272 CORPORATE PARK ROAD

City FOREST State VA Zip Code 24551

Purpose of Disbursement
FUNDRAISING DIRECT MAIL PRINTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
08 / 28 / 2017

FEC Identification Number

C
Transaction ID : **B7F282842A**
Amount of Each Disbursement this Period
430.68

Memo Item

Full Name (Last, First, Middle Initial)

B. INTERNATIONAL DATA MANAGEMENT, INC.

Mailing Address 3200 WEST MARKET ST. SUITE 302

City AKRON State OH Zip Code 44333

Purpose of Disbursement
DIRECT MAIL THANK YOU PRINTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
08 / 28 / 2017

FEC Identification Number

C
Transaction ID : **BC90187EC5I**
Amount of Each Disbursement this Period
612.22

Memo Item

Full Name (Last, First, Middle Initial)

C. WILLIAM J. OLSON, P.C.

Mailing Address 370 MAPLE AVENUE WEST
SUITE 4

City VIENNA State VA Zip Code 22180-5615

Purpose of Disbursement
LEGAL FEES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
08 / 28 / 2017

FEC Identification Number

C
Transaction ID : **B225640177I**
Amount of Each Disbursement this Period
2000.00

Memo Item

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

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

3042.90

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. WASHINGTON INTELLIGENCE BUREAU

Full Name (Last, First, Middle Initial)

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement DONATION PROCESSING, CAGING, BOOKKEEPING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 28 / 2017

FEC Identification Number: C

Transaction ID : B7ECAAF16C3

Amount of Each Disbursement this Period: 1266.25

Memo Item

B. ATKINSON, MAURICE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 695 FRIAR TUCK LN

City MACON State GA Zip Code 31220

Purpose of Disbursement SOCIAL MEDIA CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2017

FEC Identification Number: C

Transaction ID : BC480421785

Amount of Each Disbursement this Period: 750.00

Memo Item

C. SOUSA, JOHN, P, , IV

Full Name (Last, First, Middle Initial)

Mailing Address 11-C TALCOTT FOREST RD
UNIT C

City FARMINGTON State CT Zip Code 06032

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2017

FEC Identification Number: C

Transaction ID : BBE100A10E

Amount of Each Disbursement this Period: 3500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5516.25

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILL ROAD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement
BANK CHARGES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2017

FEC Identification Number

C
Transaction ID : B9B9B4F91C
Amount of Each Disbursement this Period
702.48

Memo Item

Full Name (Last, First, Middle Initial)

B. PINKSTON GROUP

Mailing Address 5270 SHAWNEE ROAD SUITE 102

City ALEXANDRIA State VA Zip Code 22312

Purpose of Disbursement
PUBLIC RELATIONS AND WEBSITE MAINTENANCE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 05 / 2017

FEC Identification Number

C
Transaction ID : B4BA81B749
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. UNITED STATES TREASURY

Mailing Address P.O. BOX 409101

City OGDEN State UT Zip Code 84409

Purpose of Disbursement
TAX PAYMENT

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2017

FEC Identification Number

C
Transaction ID : B6757F1F17
Amount of Each Disbursement this Period
5625.00

Memo Item

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

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

7327.48

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial)

A. VIRGINIA DEPARTMENT OF TAXATION

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	6		2	0	1	7

Mailing Address P.O. BOX 1777

FEC Identification Number

C []
Transaction ID : B6C55EBB8E
 Amount of Each Disbursement this Period
 [] 964.00

City RICHMOND State VA Zip Code 23218-1777

Purpose of Disbursement
TAX PAYMENT

[]
 Category/
 Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

B. INTERNATIONAL DATA MANAGEMENT, INC.

Date of Disbursement

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

Mailing Address 3200 WEST MARKET ST. SUITE 302

FEC Identification Number

C []
Transaction ID : B523D6C30D
 Amount of Each Disbursement this Period
 [] 291.19

City AKRON State OH Zip Code 44333

Purpose of Disbursement
DIRECT MAIL THANK YOU PRINTING

[]
 Category/
 Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

C. ARISTOTLE INTERNATIONAL

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	1	7

Mailing Address 205 PENNSYLVANIA AVE SE

FEC Identification Number

C []
Transaction ID : B7635E04BB
 Amount of Each Disbursement this Period
 [] 1000.00

City WASHINGTON State DC Zip Code 20003-1164

Purpose of Disbursement
COMPLIANCE DATABASE

[]
 Category/
 Type

Candidate Name

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

Memo Item

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

[] 2255.19

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 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)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial)

A. DESERT FOX STRATEGIC COMMUNICATIONS

Date of Disbursement

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

Mailing Address 5841 E CHARLESTON BLVD
SUITE 230-226

FEC Identification Number

C [Redacted]
Transaction ID : BFFF10186A
Amount of Each Disbursement this Period
[Redacted] 1000.00

City MT REAGAN State NV Zip Code 89142

Purpose of Disbursement
COMMUNICATIONS CONSULTING

[Redacted]
Category/
Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

B. SAVANNA COMMUNICATIONS

Date of Disbursement

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

Mailing Address 755 SONNE DRIVE

FEC Identification Number

C [Redacted]
Transaction ID : B32C9148EF
Amount of Each Disbursement this Period
[Redacted] 3500.00

City ANNAPOLIS State MD Zip Code 21401-7120

Purpose of Disbursement
GENERAL MEDIA CONSULTING

[Redacted]
Category/
Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

C. SOUSA, JOHN, P, , IV

Date of Disbursement

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

Mailing Address 11-C TALCOTT FOREST RD
UNIT C

FEC Identification Number

C [Redacted]
Transaction ID : BF9C9D4FE
Amount of Each Disbursement this Period
[Redacted] 3500.00

City FARMINGTON State CT Zip Code 06032

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

[Redacted]
Category/
Type

Candidate Name

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

Memo Item

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

[Redacted] 8000.00

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

[Redacted]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. HUCKABY DAVIS LISKER

Full Name (Last, First, Middle Initial)

Mailing Address 228 S WASHINGTON STREET
SUITE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FEC COMPLIANCE AND ACCOUNTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 15 / 2017

FEC Identification Number: C

Transaction ID : BC84987BD5

Amount of Each Disbursement this Period: 550.00

Memo Item

B. WILLIAM J. OLSON, P.C.

Full Name (Last, First, Middle Initial)

Mailing Address 370 MAPLE AVENUE WEST
SUITE 4

City VIENNA State VA Zip Code 22180-5615

Purpose of Disbursement
LEGAL FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 15 / 2017

FEC Identification Number: C

Transaction ID : BE5913F039C

Amount of Each Disbursement this Period: 2000.00

Memo Item

C. SARACINO, WILLIAM, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3625 ANGELUS AVE

City GLENDALE State CA Zip Code 91208

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 15 / 2017

FEC Identification Number: C

Transaction ID : B26B10681C

Amount of Each Disbursement this Period: 1500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4050.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial) A. ATKINSON, MAURICE, , ,		Date of Disbursement MM / DD / YYYY 09 / 15 / 2017	
Mailing Address 695 FRIAR TUCK LN		FEC Identification Number C [REDACTED] Transaction ID : B24EBF75DA Amount of Each Disbursement this Period [REDACTED] 750.00	
City MACON	State GA	Zip Code 31220	Category/ Type [REDACTED]
Purpose of Disbursement SOCIAL MEDIA 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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. ADP		Date of Disbursement MM / DD / YYYY 09 / 22 / 2017	
Mailing Address 2812 EMERYWOOD PARKWAY		FEC Identification Number C [REDACTED] Transaction ID : B07DA1604CI Amount of Each Disbursement this Period [REDACTED] 280.26	
City RICHMOND	State VA	Zip Code 23294	Category/ Type [REDACTED]
Purpose of Disbursement PAYROLL SERVICE 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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. WASHINGTON INTELLIGENCE BUREAU		Date of Disbursement MM / DD / YYYY 09 / 25 / 2017	
Mailing Address 4128 PEPSI PLACE		FEC Identification Number C [REDACTED] Transaction ID : B0FF7C3B91 Amount of Each Disbursement this Period [REDACTED] 1663.79	
City CHANTILLY	State VA	Zip Code 20151	Category/ Type [REDACTED]
Purpose of Disbursement DONATION PROCESSING, CAGING, BOOKKEEPING		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

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

2694.05

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial)

A. PARAMOUNT COMMUNICATIONS

Mailing Address 525-K EAST MARKET STREET SUITE 114

City LEESBURG State VA Zip Code 20176

Purpose of Disbursement
FUNDRAISING EMAIL DISTRIBUTION SERVICE

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 25 / 2017

FEC Identification Number

C
Transaction ID : B70F39F24C
Amount of Each Disbursement this Period
1715.62

Memo Item

Full Name (Last, First, Middle Initial)

B. HUCKABY DAVIS LISKER

Mailing Address 228 S WASHINGTON STREET SUITE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FEC COMPLIANCE AND ACCOUNTING

Candidate Name

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

Date of Disbursement

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

FEC Identification Number

C
Transaction ID : B7FCDB63AF
Amount of Each Disbursement this Period
2750.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ATKINSON, MAURICE, , ,

Mailing Address 695 FRIAR TUCK LN

City MACON State GA Zip Code 31220

Purpose of Disbursement
SOCIAL MEDIA CONSULTING

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

FEC Identification Number

C
Transaction ID : B6C70DDDF
Amount of Each Disbursement this Period
750.00

Memo Item

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

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

5215.62

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial) A. SOUSA, JOHN, P, , IV		Date of Disbursement MM / DD / YYYY 09 / 30 / 2017
Mailing Address 11-C TALCOTT FOREST RD UNIT C		FEC Identification Number C [REDACTED] Transaction ID : BE856A06BF Amount of Each Disbursement this Period 3500.00
City FARMINGTON	State CT	Zip Code 06032
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. FIRST VIRGINIA COMMUNITY BANK		Date of Disbursement MM / DD / YYYY 09 / 30 / 2017
Mailing Address 11325 RANDOM HILL ROAD		FEC Identification Number C [REDACTED] Transaction ID : B25728B8955 Amount of Each Disbursement this Period 745.35
City FAIRFAX	State VA	Zip Code 22030
Purpose of Disbursement BANK CHARGES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. EBERLE COMMUNICATIONS GROUP		Date of Disbursement MM / DD / YYYY 10 / 09 / 2017
Mailing Address 1420 SPRING HILL ROAD SUITE 490		FEC Identification Number C [REDACTED] Transaction ID : B03C5B2059 Amount of Each Disbursement this Period 8166.49
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement DIRECT MAIL DATA CENTER		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	12411.84
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial) A. PINKSTON GROUP		Date of Disbursement MM / DD / YYYY 10 / 09 / 2017
Mailing Address 5270 SHAWNEE ROAD SUITE 102		FEC Identification Number C [REDACTED]
City ALEXANDRIA	State VA	Zip Code 22312
Purpose of Disbursement PUBLIC RELATIONS AND WEBSITE MAINTENANCE		Transaction ID : B99C4D9305
Candidate Name		Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. CAMPAIGN FUNDING DIRECT		Date of Disbursement MM / DD / YYYY 10 / 09 / 2017
Mailing Address 1420 SPRING HILL ROAD, SUITE 490		FEC Identification Number C [REDACTED]
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING CREATIVE COPY/POSTAGE		Transaction ID : B235864678D
Candidate Name		Amount of Each Disbursement this Period 19053.79
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. RST MARKETING		Date of Disbursement MM / DD / YYYY 10 / 09 / 2017
Mailing Address 1272 CORPORATE PARK ROAD		FEC Identification Number C [REDACTED]
City FOREST	State VA	Zip Code 24551
Purpose of Disbursement FUNDRAISING DIRECT MAIL PRINTING		Transaction ID : B68E4C26A9
Candidate Name		Amount of Each Disbursement this Period 2508.44
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	22562.23
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial)
A. WILLIAM J. OLSON, P.C.

Date of Disbursement
MM / DD / YYYY
10 / 10 / 2017

Mailing Address 370 MAPLE AVENUE WEST
SUITE 4

City VIENNA State VA Zip Code 22180-5615

Purpose of Disbursement LEGAL FEES

Candidate Name

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

State: District:

FEC Identification Number
C
Transaction ID : BDE0453D29
Amount of Each Disbursement this Period
2045.29

Memo Item

Full Name (Last, First, Middle Initial)
B. SAVANNA COMMUNICATIONS

Date of Disbursement
MM / DD / YYYY
10 / 10 / 2017

Mailing Address 755 SONNE DRIVE

City ANNAPOLIS State MD Zip Code 21401-7120

Purpose of Disbursement GENERAL MEDIA CONSULTING

Candidate Name

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

State: District:

FEC Identification Number
C
Transaction ID : B113862863C
Amount of Each Disbursement this Period
3500.00

Memo Item

Full Name (Last, First, Middle Initial)
C. VIRGINIA DEPARTMENT OF TAXATION

Date of Disbursement
MM / DD / YYYY
10 / 11 / 2017

Mailing Address P.O. BOX 1777

City RICHMOND State VA Zip Code 23218-1777

Purpose of Disbursement TAX PAYMENT

Candidate Name

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

State: District:

FEC Identification Number
C
Transaction ID : BE1526E702
Amount of Each Disbursement this Period
119.06

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5664.35

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 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)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial) A. ARISTOTLE INTERNATIONAL		Date of Disbursement MM / DD / YYYY 10 / 13 / 2017
Mailing Address 205 PENNSYLVANIA AVE SE		FEC Identification Number C [REDACTED] Transaction ID : B5088990359
City WASHINGTON	State DC	Zip Code 20003-1164
Purpose of Disbursement COMPLIANCE DATABASE		Amount of Each Disbursement this Period [REDACTED] 1000.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. DESERT FOX STRATEGIC COMMUNICATIONS		Date of Disbursement MM / DD / YYYY 10 / 15 / 2017
Mailing Address 5841 E CHARLESTON BLVD SUITE 230-226		FEC Identification Number C [REDACTED] Transaction ID : B9D02DBD39
City MT REAGAN	State NV	Zip Code 89142
Purpose of Disbursement COMMUNICATIONS CONSULTING		Amount of Each Disbursement this Period [REDACTED] 1000.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. SOUSA, JOHN, P, , IV		Date of Disbursement MM / DD / YYYY 10 / 15 / 2017
Mailing Address 11-C TALCOTT FOREST RD UNIT C		FEC Identification Number C [REDACTED] Transaction ID : B437827186t
City FARMINGTON	State CT	Zip Code 06032
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Amount of Each Disbursement this Period [REDACTED] 3500.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 5500.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial) A. ATKINSON, MAURICE, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2017	
Mailing Address 695 FRIAR TUCK LN		FEC Identification Number C [REDACTED] Transaction ID : BAA3E96A9F Amount of Each Disbursement this Period [REDACTED] 750.00	
City MACON	State GA	Zip Code 31220	Category/ Type [REDACTED]
Purpose of Disbursement SOCIAL MEDIA 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:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. SARACINO, WILLIAM, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2017	
Mailing Address 3625 ANGELUS AVE		FEC Identification Number C [REDACTED] Transaction ID : B22793E5333 Amount of Each Disbursement this Period [REDACTED] 1500.00	
City GLENDALE	State CA	Zip Code 91208	Category/ Type [REDACTED]
Purpose of Disbursement POLITICAL STRATEGY 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:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. VALTIM		Date of Disbursement MM / DD / YYYY 10 / 16 / 2017	
Mailing Address P.O. BOX 809 1095 VENTURE DR		FEC Identification Number C [REDACTED] Transaction ID : B4BB94DAD Amount of Each Disbursement this Period [REDACTED] 2900.00	
City FOREST	State VA	Zip Code 24551-0809	Category/ Type [REDACTED]
Purpose of Disbursement FUNDRAISING DIRECT MAIL POSTAGE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 5150.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial)

A. PARAMOUNT COMMUNICATIONS

Mailing Address 525-K EAST MARKET STREET SUITE 114

City LEESBURG State VA Zip Code 20176

Purpose of Disbursement
FUNDRAISING EMAIL DISTRIBUTION SERVICE

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B6C82421C4I
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 2812 EMERYWOOD PARKWAY

City RICHMOND State VA Zip Code 23294

Purpose of Disbursement
PAYROLL SERVICE FEE

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BC25E67EFB
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. BB&T

Mailing Address 300 S WASHINGTON STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
BANK FEES

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BEE23F0DCI
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial)

A. INTERNATIONAL DATA MANAGEMENT, INC.

Mailing Address 3200 WEST MARKET ST. SUITE 302

City AKRON State OH Zip Code 44333

Purpose of Disbursement
DIRECT MAIL THANK YOU PRINTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2017

FEC Identification Number

C
Transaction ID : B6DD4AF44E
Amount of Each Disbursement this Period
867.03

Memo Item

Full Name (Last, First, Middle Initial)

B. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
DONATION PROCESSING, CAGING, BOOKKEEPING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2017

FEC Identification Number

C
Transaction ID : B091E7ADF0I
Amount of Each Disbursement this Period
1429.43

Memo Item

Full Name (Last, First, Middle Initial)

C. HUCKABY DAVIS LISKER

Mailing Address 228 S WASHINGTON STREET
SUITE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FEC COMPLIANCE AND ACCOUNTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2017

FEC Identification Number

C
Transaction ID : B0809E49F1!
Amount of Each Disbursement this Period
2750.00

Memo Item

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

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

5046.46

**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 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)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial) A. ATKINSON, MAURICE, , ,		Date of Disbursement MM / DD / YYYY 10 / 31 / 2017
Mailing Address 695 FRIAR TUCK LN		FEC Identification Number C [] Transaction ID : B0168A37FD: Amount of Each Disbursement this Period [] 750.00
City MACON	State GA	Zip Code 31220
Purpose of Disbursement SOCIAL MEDIA CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. SOUSA, JOHN, P, , IV		Date of Disbursement MM / DD / YYYY 10 / 31 / 2017
Mailing Address 11-C TALCOTT FOREST RD UNIT C		FEC Identification Number C [] Transaction ID : B3FAD87B80: Amount of Each Disbursement this Period [] 3500.00
City FARMINGTON	State CT	Zip Code 06032
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FIRST VIRGINIA COMMUNITY BANK		Date of Disbursement MM / DD / YYYY 10 / 31 / 2017
Mailing Address 11325 RANDOM HILL ROAD		FEC Identification Number C [] Transaction ID : BA81B5DB61: Amount of Each Disbursement this Period [] 951.71
City FAIRFAX	State VA	Zip Code 22030
Purpose of Disbursement BANK CHARGES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 5201.71
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 2812 EMERYWOOD PARKWAY

City RICHMOND State VA Zip Code 23294

Purpose of Disbursement
PAYROLL SERVICE 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 Y Y
11 / 03 / 2017

FEC Identification Number

C
Transaction ID : BC59CA3C4F
Amount of Each Disbursement this Period
50.29

Memo Item

Full Name (Last, First, Middle Initial)

B. UNITED STATES TREASURY

Mailing Address P.O. BOX 409101

City OGDEN State UT Zip Code 84409

Purpose of Disbursement
TAX PAYMENT

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 03 / 2017

FEC Identification Number

C
Transaction ID : B71CF12ECB
Amount of Each Disbursement this Period
219.24

Memo Item

Full Name (Last, First, Middle Initial)

C. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
DONATION PROCESSING, CAGING, BOOKKEEPING

Candidate Name

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

Date of Disbursement

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

FEC Identification Number

C
Transaction ID : BC9E7E4AF/
Amount of Each Disbursement this Period
974.79

Memo Item

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

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

1244.32

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. OMEGA LIST COMPANY

Full Name (Last, First, Middle Initial)

Mailing Address 1420 SPRING HILL ROAD
SUITE 490

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement FUNDRAISING LIST RENTAL

Candidate Name

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

State: District:

Date of Disbursement: 11 / 06 / 2017

FEC Identification Number: C

Transaction ID : B7C1553AC0

Amount of Each Disbursement this Period: 1183.98

Memo Item

B. CAMPAIGN FUNDING DIRECT

Full Name (Last, First, Middle Initial)

Mailing Address 1420 SPRING HILL ROAD, SUITE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement FUNDRAISING CREATIVE COPY/POSTAGE

Candidate Name

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

State: District:

Date of Disbursement: 11 / 06 / 2017

FEC Identification Number: C

Transaction ID : B8EFD8EEEE

Amount of Each Disbursement this Period: 24.38

Memo Item

C. VALTIM

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 809
1095 VENTURE DR

City FOREST State VA Zip Code 24551-0809

Purpose of Disbursement FUNDRAISING DIRECT MAIL POSTAGE

Candidate Name

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

State: District:

Date of Disbursement: 11 / 06 / 2017

FEC Identification Number: C

Transaction ID : B28FD61CB6

Amount of Each Disbursement this Period: 2600.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3808.36

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. PINKSTON GROUP

Full Name (Last, First, Middle Initial)

Mailing Address 5270 SHAWNEE ROAD SUITE 102

City ALEXANDRIA State VA Zip Code 22312

Purpose of Disbursement PUBLIC RELATIONS AND WEBSITE MAINTENANCE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 06 / 2017

FEC Identification Number: C

Transaction ID : **BB70FF3597**

Amount of Each Disbursement this Period: 1000.00

Memo Item

B. ARISTOTLE INTERNATIONAL

Full Name (Last, First, Middle Initial)

Mailing Address 205 PENNSYLVANIA AVE SE

City WASHINGTON State DC Zip Code 20003-1164

Purpose of Disbursement COMPLIANCE DATABASE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 10 / 2017

FEC Identification Number: C

Transaction ID : **B64075E902A**

Amount of Each Disbursement this Period: 1000.00

Memo Item

C. SAVANNA COMMUNICATIONS

Full Name (Last, First, Middle Initial)

Mailing Address 755 SONNE DRIVE

City ANNAPOLIS State MD Zip Code 21401-7120

Purpose of Disbursement GENERAL MEDIA CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 10 / 2017

FEC Identification Number: C

Transaction ID : **B1BAEA7F0**

Amount of Each Disbursement this Period: 3500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial)

A. PARAMOUNT COMMUNICATIONS

Mailing Address 525-K EAST MARKET STREET SUITE 114

City LEESBURG State VA Zip Code 20176

Purpose of Disbursement
FUNDRAISING EMAIL DISTRIBUTION SERVICE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
11 / 13 / 2017

FEC Identification Number

C
Transaction ID : **BF8569FD59**
Amount of Each Disbursement this Period
1025.89

Memo Item

Full Name (Last, First, Middle Initial)

B. INTERNATIONAL DATA MANAGEMENT, INC.

Mailing Address 3200 WEST MARKET ST. SUITE 302

City AKRON State OH Zip Code 44333

Purpose of Disbursement
DIRECT MAIL THANK YOU PRINTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
11 / 13 / 2017

FEC Identification Number

C
Transaction ID : **B741337CBEI**
Amount of Each Disbursement this Period
32.83

Memo Item

Full Name (Last, First, Middle Initial)

C. SOUSA, JOHN, P, , IV

Mailing Address 11-C TALCOTT FOREST RD
UNIT C

City FARMINGTON State CT Zip Code 06032

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
11 / 15 / 2017

FEC Identification Number

C
Transaction ID : **B38749441D**
Amount of Each Disbursement this Period
3500.00

Memo Item

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

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

4558.72

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial)

A. DESERT FOX STRATEGIC COMMUNICATIONS

Date of Disbursement

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

Mailing Address 5841 E CHARLESTON BLVD
SUITE 230-226

City MT REAGAN State NV Zip Code 89142

Purpose of Disbursement
COMMUNICATIONS CONSULTING

FEC Identification Number

C [REDACTED]

Transaction ID : B2880A204B
Amount of Each Disbursement this Period

[REDACTED] 1000.00

Memo Item

Candidate Name

Category/
Type

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

Full Name (Last, First, Middle Initial)

B. ATKINSON, MAURICE, , ,

Date of Disbursement

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

Mailing Address 695 FRIAR TUCK LN

City MACON State GA Zip Code 31220

Purpose of Disbursement
SOCIAL MEDIA CONSULTING

FEC Identification Number

C [REDACTED]

Transaction ID : B19346FC580
Amount of Each Disbursement this Period

[REDACTED] 750.00

Memo Item

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

Full Name (Last, First, Middle Initial)

C. SARACINO, WILLIAM, , ,

Date of Disbursement

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

Mailing Address 3625 ANGELUS AVE

City GLENDALE State CA Zip Code 91208

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

FEC Identification Number

C [REDACTED]

Transaction ID : BCB3B9C0D
Amount of Each Disbursement this Period

[REDACTED] 1500.00

Memo Item

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

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

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

[REDACTED] 3250.00

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial)

A. LOBEL COOPER & ASSOCIATES PC

Mailing Address 6309 EXECUTIVE BLVD

City ROCKVILLE State MD Zip Code 20852-3905

Purpose of Disbursement
ACCOUNTING FEES

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
1	1		1	5		2	0	1	7

FEC Identification Number

C [REDACTED]
Transaction ID : BCE65614AB
Amount of Each Disbursement this Period
[REDACTED] 778.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ZIP MAILING SERVICES, INC.

Mailing Address 6304 SHERIFF RD. STE Z

City LANDOVER State MD Zip Code 20785

Purpose of Disbursement
FUNDRAISING DIRECT MAIL PRINTING

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
1	1		2	0		2	0	1	7

FEC Identification Number

C [REDACTED]
Transaction ID : BEA9919AB4
Amount of Each Disbursement this Period
[REDACTED] 17625.00

Memo Item

Full Name (Last, First, Middle Initial)

C. BB&T

Mailing Address 300 S WASHINGTON STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
BANK FEES

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
1	1		2	1		2	0	1	7

FEC Identification Number

C [REDACTED]
Transaction ID : B35A71CC58
Amount of Each Disbursement this Period
[REDACTED] 30.00

Memo Item

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

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

[REDACTED]	18433.00
[REDACTED]	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILL ROAD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement
BANK CHARGES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

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

FEC Identification Number

C
Transaction ID : B3650784BDI
Amount of Each Disbursement this Period
980.71

Memo Item

Full Name (Last, First, Middle Initial)

B. SOUSA, JOHN, P, , IV

Mailing Address 11-C TALCOTT FOREST RD
UNIT C

City FARMINGTON State CT Zip Code 06032

Purpose of Disbursement
EXPENSE REIMBURSEMENT: SEE ITEMIZATION BELOW

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
08 / 25 / 2017

FEC Identification Number

C
Transaction ID : B2D72C6387f
Amount of Each Disbursement this Period
738.90

Memo Item

Full Name (Last, First, Middle Initial)

C. HYATT REGENCY

Mailing Address 12777 FAIR LAKES CIR,

City FAIRFAX State VA Zip Code 22033

Purpose of Disbursement
LODGING

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
08 / 25 / 2017

FEC Identification Number

C
Transaction ID : B8963C4A15
Amount of Each Disbursement this Period
320.76

Memo Item

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

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

1719.61

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BOULEVARD

City
FORT WORTH

State
TX

Zip Code
76155-2605

Purpose of Disbursement
AIR TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 25 / 2017

FEC Identification Number

C
Transaction ID : B164E760015
Amount of Each Disbursement this Period
284.40

Memo Item

Full Name (Last, First, Middle Initial)

B. AVIS

Mailing Address 6 SYLVAN WAY

City
PARSIPPANY

State
NJ

Zip Code
07054-3826

Purpose of Disbursement
CAR RENTAL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 25 / 2017

FEC Identification Number

C
Transaction ID : B01CD06B54:
Amount of Each Disbursement this Period
78.44

Memo Item

Full Name (Last, First, Middle Initial)

C. MDI IMAGING AND MAIL

Mailing Address 21955 CASCADES PARKWAY

City
DULLES

State
VA

Zip Code
20166

Purpose of Disbursement
DIRECT MAIL POSTAGE (ORIGINAL AMOUNT ESTIMATED)

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 02 / 2017

FEC Identification Number

C
Transaction ID : BE942D2BC:
Amount of Each Disbursement this Period
10523.86

Memo Item

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

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

10523.86

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial) A. SOUSA, JOHN, P, , IV		Date of Disbursement MM / DD / YYYY 08 / 03 / 2017
Mailing Address 11-C TALCOTT FOREST RD UNIT C		FEC Identification Number C [REDACTED] Transaction ID : B7477C7071E Amount of Each Disbursement this Period [REDACTED] 2149.80
City FARMINGTON	State CT	Zip Code 06032
Purpose of Disbursement EXPENSE REIMBURSEMENT: SEE ITEMIZATION BELOW		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. HYATT REGENCY		Date of Disbursement MM / DD / YYYY 08 / 03 / 2017
Mailing Address 12777 FAIR LAKES CIR,		FEC Identification Number C [REDACTED] Transaction ID : BF8CA3736B Amount of Each Disbursement this Period [REDACTED] 493.73
City FAIRFAX	State VA	Zip Code 22033
Purpose of Disbursement LODGING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 08 / 03 / 2017
Mailing Address 1030 DELTA BOULEVARD		FEC Identification Number C [REDACTED] Transaction ID : BBF253CCA Amount of Each Disbursement this Period [REDACTED] 1328.67
City ATLANTA	State GA	Zip Code 30354-1989
Purpose of Disbursement AIR TRAVEL		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 2149.80
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial) A. COLORTREE GROUP INC		Date of Disbursement MM / DD / YYYY 07 / 31 / 2017
Mailing Address 8000 VILLA PARK DR		FEC Identification Number C [REDACTED] Transaction ID : B69E8BE04C Amount of Each Disbursement this Period [REDACTED] 954.00
City RICHMOND	State VA	Zip Code 23228-6500
Purpose of Disbursement DIRECT MAIL PRINTING		Category/Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. OMEGA LIST COMPANY		Date of Disbursement MM / DD / YYYY 07 / 17 / 2017
Mailing Address 1420 SPRING HILL ROAD SUITE 490		FEC Identification Number C [REDACTED] Transaction ID : B1F32DB889! Amount of Each Disbursement this Period [REDACTED] 4699.00
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement DIRECT MAIL LIST RENTAL		Category/Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. SOUSA, JOHN, P, , IV		Date of Disbursement MM / DD / YYYY 11 / 17 / 2017
Mailing Address 11-C TALCOTT FOREST RD UNIT C		FEC Identification Number C [REDACTED] Transaction ID : BC00D2B70C Amount of Each Disbursement this Period [REDACTED] 1655.98
City FARMINGTON	State CT	Zip Code 06032
Purpose of Disbursement EXPENSE REIMBURSEMENT: SEE ITEMIZATION BELOW		Category/Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 7308.98
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial)

A. AVIS

Mailing Address 6 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054-3826

Purpose of Disbursement
CAR RENTAL

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
11 / 17 / 2017

FEC Identification Number

C
Transaction ID : B58D47A116:
Amount of Each Disbursement this Period
135.06

Memo Item

Full Name (Last, First, Middle Initial)

B. DELTA AIRLINES

Mailing Address 1030 DELTA BOULEVARD

City ATLANTA State GA Zip Code 30354-1989

Purpose of Disbursement
AIR TRAVEL

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
11 / 17 / 2017

FEC Identification Number

C
Transaction ID : B84609D2B9C
Amount of Each Disbursement this Period
935.60

Memo Item

Full Name (Last, First, Middle Initial)

C. WESTIN HOTELS

Mailing Address 12720 MERIT DR

City DALLAS State TX Zip Code 75251-1206

Purpose of Disbursement
LODGING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
11 / 17 / 2017

FEC Identification Number

C
Transaction ID : B121106B81:
Amount of Each Disbursement this Period
485.87

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 Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. SOUSA, JOHN, P, , IV

Full Name (Last, First, Middle Initial)

Mailing Address 11-C TALCOTT FOREST RD
UNIT C

City FARMINGTON State CT Zip Code 06032

Purpose of Disbursement EXPENSE REIMBURSEMENT: SEE ITEMIZATION BELOW

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
11 / 02 / 2017

FEC Identification Number: C

Transaction ID : B681A176712

Amount of Each Disbursement this Period: 607.31

Memo Item

B. HYATT REGENCY

Full Name (Last, First, Middle Initial)

Mailing Address 12777 FAIR LAKES CIR,

City FAIRFAX State VA Zip Code 22033

Purpose of Disbursement LODGING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
11 / 02 / 2017

FEC Identification Number: C

Transaction ID : B061DBC8FE

Amount of Each Disbursement this Period: 266.24

Memo Item

C. AVIS

Full Name (Last, First, Middle Initial)

Mailing Address 6 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054-3826

Purpose of Disbursement CAR RENTAL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
11 / 02 / 2017

FEC Identification Number: C

Transaction ID : BFB11F971C

Amount of Each Disbursement this Period: 52.80

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 607.31

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BOULEVARD

City FORT WORTH State TX Zip Code 76155-2605

Purpose of Disbursement
AIR TRAVEL

Candidate Name

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			02			2017					

FEC Identification Number

C []
Transaction ID : BC14388165
 Amount of Each Disbursement this Period
 [] 284.40

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

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

FEC Identification Number

C []
 Amount of Each Disbursement this Period
 []

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

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

FEC Identification Number

C []
 Amount of Each Disbursement this Period
 []

Memo Item

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

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

0.00
210495.28

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 181 OF 256
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor OMEGA LIST COMPANY			Nature of Debt (Purpose): DIRECT MAIL LIST RENTAL
Mailing Address 1420 SPRING HILL ROAD SUITE 490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period 4699.00	Transaction ID : D1F0411941EEE48EC88F	
Amount Incurred This Period 0.00	Payment This Period 4699.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor COLORTREE GROUP INC			Nature of Debt (Purpose): DIRECT MAIL PRINTING
Mailing Address 8000 VILLA PARK DR			
City RICHMOND	State VA	Zip Code 23228-6500	

Outstanding Balance Beginning This Period 954.00	Transaction ID : D47C477DD46564A6E95C	
Amount Incurred This Period 0.00	Payment This Period 954.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor MDI IMAGING AND MAIL			Nature of Debt (Purpose): DIRECT MAIL POSTAGE (ORIGINAL AMOUNT ESTIMATED)
Mailing Address 21955 CASCADES PARKWAY			
City DULLES	State VA	Zip Code 20166	

Outstanding Balance Beginning This Period 27414.00	Transaction ID : D717C748EAC3E441AB77	
Amount Incurred This Period 0.00	Payment This Period 27414.00	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 182 OF 256
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ACTION MAILERS			Nature of Debt (Purpose): DIRECT MAIL PRINTING
Mailing Address 90 COMMERCE DRIVE			
City ASTON	State PA	Zip Code 19014-3201	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D067085488A374C1AABD	
Amount Incurred This Period 93.53	Payment This Period 0.00	Outstanding Balance at Close of This Period 93.53

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ACTION MAILERS			Nature of Debt (Purpose): DIRECT MAIL PRINTING
Mailing Address 90 COMMERCE DRIVE			
City ASTON	State PA	Zip Code 19014-3201	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D717CCF1DFDFD43B08FB	
Amount Incurred This Period 93.53	Payment This Period 0.00	Outstanding Balance at Close of This Period 93.53

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor ACTION MAILERS			Nature of Debt (Purpose): DIRECT MAIL PRINTING
Mailing Address 90 COMMERCE DRIVE			
City ASTON	State PA	Zip Code 19014-3201	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D32D2FF8FD87C4A3D86C	
Amount Incurred This Period 7115.35	Payment This Period 0.00	Outstanding Balance at Close of This Period 7115.35

1) SUBTOTALS This Period This Page (optional)..... ▶	7302.41
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 183 OF 256
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ACTION MAILERS		Nature of Debt (Purpose): DIRECT MAIL PRINTING	
Mailing Address 90 COMMERCE DRIVE			
City ASTON	State PA	Zip Code 19014-3201	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D757599AAE15C4166907	
Amount Incurred This Period 121.12	Payment This Period 0.00	Outstanding Balance at Close of This Period 121.12	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ACTION MAILERS		Nature of Debt (Purpose): DIRECT MAIL PRINTING	
Mailing Address 90 COMMERCE DRIVE			
City ASTON	State PA	Zip Code 19014-3201	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D6182542C250648A5BBC	
Amount Incurred This Period 1328.06	Payment This Period 0.00	Outstanding Balance at Close of This Period 1328.06	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor ACTION MAILERS		Nature of Debt (Purpose): DIRECT MAIL PRINTING	
Mailing Address 90 COMMERCE DRIVE			
City ASTON	State PA	Zip Code 19014-3201	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D28D862C3020D430390C	
Amount Incurred This Period 121.12	Payment This Period 0.00	Outstanding Balance at Close of This Period 121.12	

1) SUBTOTALS This Period This Page (optional).....▶	1570.30
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 184 OF 256
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ACTION MAILERS		Nature of Debt (Purpose): DIRECT MAIL PRINTING	
Mailing Address 90 COMMERCE DRIVE			
City ASTON	State PA	Zip Code 19014-3201	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D6DB6C66D07034049A9C	
Amount Incurred This Period 251.13	Payment This Period 0.00	Outstanding Balance at Close of This Period 251.13	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ACTION MAILERS		Nature of Debt (Purpose): DIRECT MAIL PRINTING	
Mailing Address 90 COMMERCE DRIVE			
City ASTON	State PA	Zip Code 19014-3201	

Outstanding Balance Beginning This Period 0.00		Transaction ID : DCBB65C411C744718974	
Amount Incurred This Period 251.13	Payment This Period 0.00	Outstanding Balance at Close of This Period 251.13	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor ACTION MAILERS		Nature of Debt (Purpose): DIRECT MAIL PRINTING	
Mailing Address 90 COMMERCE DRIVE			
City ASTON	State PA	Zip Code 19014-3201	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D64038CD484DB48F1BD8	
Amount Incurred This Period 121.12	Payment This Period 0.00	Outstanding Balance at Close of This Period 121.12	

1) SUBTOTALS This Period This Page (optional)..... ▶	623.38
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 185 OF 256
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ACTION MAILERS		Nature of Debt (Purpose): DIRECT MAIL PRINTING	
Mailing Address 90 COMMERCE DRIVE			
City ASTON	State PA	Zip Code 19014-3201	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D86212BA90C114F61B4B	
Amount Incurred This Period 344.66	Payment This Period 0.00	Outstanding Balance at Close of This Period 344.66	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ACTION MAILERS		Nature of Debt (Purpose): DIRECT MAIL PRINTING	
Mailing Address 90 COMMERCE DRIVE			
City ASTON	State PA	Zip Code 19014-3201	

Outstanding Balance Beginning This Period 0.00		Transaction ID : DA0789219EB8D4035BDB	
Amount Incurred This Period 158.53	Payment This Period 0.00	Outstanding Balance at Close of This Period 158.53	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor ACTION MAILERS		Nature of Debt (Purpose): DIRECT MAIL PRINTING	
Mailing Address 90 COMMERCE DRIVE			
City ASTON	State PA	Zip Code 19014-3201	

Outstanding Balance Beginning This Period 0.00		Transaction ID : DC959482C6E3248A7B36	
Amount Incurred This Period 121.12	Payment This Period 0.00	Outstanding Balance at Close of This Period 121.12	

1) SUBTOTALS This Period This Page (optional)..... ▶	624.31
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 186 OF 256
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ACTION MAILERS			Nature of Debt (Purpose): DIRECT MAIL PRINTING
Mailing Address 90 COMMERCE DRIVE			
City ASTON	State PA	Zip Code 19014-3201	

Outstanding Balance Beginning This Period	Transaction ID : D8E71A5DE04AB4729A29	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="121.12"/>	<input type="text" value="0.00"/>	<input type="text" value="121.12"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor COLORTREE GROUP INC			Nature of Debt (Purpose): DIRECT MAIL PRINTING
Mailing Address 8000 VILLA PARK DR			
City RICHMOND	State VA	Zip Code 23228-6500	

Outstanding Balance Beginning This Period	Transaction ID : DE82E4D905B51457CA62	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="3.22"/>	<input type="text" value="0.00"/>	<input type="text" value="3.22"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor VALTIM			Nature of Debt (Purpose): DIRECT MAIL POSTAGE/MAILHOUSE
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period	Transaction ID : DE5A804EBBAAB49739C4	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="76.32"/>	<input type="text" value="0.00"/>	<input type="text" value="76.32"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="200.66"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 187 OF 256
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor VALTIM		Nature of Debt (Purpose): DIRECT MAIL POSTAGE/MAILHOUSE	
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period		Transaction ID : DE5AFC3177BEF49CD951	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="19.08"/>	<input type="text" value="0.00"/>	<input type="text" value="19.08"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor VALTIM		Nature of Debt (Purpose): DIRECT MAIL POSTAGE/MAILHOUSE	
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period		Transaction ID : D9583F8687406422956	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="19.08"/>	<input type="text" value="0.00"/>	<input type="text" value="19.08"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor COLORTREE GROUP INC		Nature of Debt (Purpose): DIRECT MAIL PRINTING	
Mailing Address 8000 VILLA PARK DR			
City RICHMOND	State VA	Zip Code 23228-6500	

Outstanding Balance Beginning This Period		Transaction ID : D3BC50F8BFC8B4717865	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="12.88"/>	<input type="text" value="0.00"/>	<input type="text" value="12.88"/>	

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="51.04"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 188 OF 256
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor VALTIM			Nature of Debt (Purpose): DIRECT MAIL POSTAGE/MAILHOUSE
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DFF52357697864958BE5	
Amount Incurred This Period 19.08	Payment This Period 0.00	Outstanding Balance at Close of This Period 19.08

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor VALTIM			Nature of Debt (Purpose): DIRECT MAIL POSTAGE/MAILHOUSE
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DC55CC66831154ED1997	
Amount Incurred This Period 1564.51	Payment This Period 0.00	Outstanding Balance at Close of This Period 1564.51

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor COLORTREE GROUP INC			Nature of Debt (Purpose): DIRECT MAIL PRINTING
Mailing Address 8000 VILLA PARK DR			
City RICHMOND	State VA	Zip Code 23228-6500	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DCE4B514D31144A4B999	
Amount Incurred This Period 3.22	Payment This Period 0.00	Outstanding Balance at Close of This Period 3.22

1) SUBTOTALS This Period This Page (optional)..... ▶	1586.81
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 189 OF 256
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor COLORTREE GROUP INC		Nature of Debt (Purpose): DIRECT MAIL PRINTING	
Mailing Address 8000 VILLA PARK DR			
City RICHMOND	State VA	Zip Code 23228-6500	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D6BD6AF5B6F644095A01	
Amount Incurred This Period 3.22	Payment This Period 0.00	Outstanding Balance at Close of This Period 3.22	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor COLORTREE GROUP INC		Nature of Debt (Purpose): DIRECT MAIL PRINTING	
Mailing Address 8000 VILLA PARK DR			
City RICHMOND	State VA	Zip Code 23228-6500	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D197C03873E8F4B37B87	
Amount Incurred This Period 12.88	Payment This Period 0.00	Outstanding Balance at Close of This Period 12.88	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor COLORTREE GROUP INC		Nature of Debt (Purpose): DIRECT MAIL PRINTING	
Mailing Address 8000 VILLA PARK DR			
City RICHMOND	State VA	Zip Code 23228-6500	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D1FE4C0BE235445EA94F	
Amount Incurred This Period 3.22	Payment This Period 0.00	Outstanding Balance at Close of This Period 3.22	

1) SUBTOTALS This Period This Page (optional)..... ▶	19.32
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 190 OF 256
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor VALTIM			Nature of Debt (Purpose): DIRECT MAIL POSTAGE/MAILHOUSE
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DD119C2C36BAD4772804	
Amount Incurred This Period 19.08	Payment This Period 0.00	Outstanding Balance at Close of This Period 19.08

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor VALTIM			Nature of Debt (Purpose): DIRECT MAIL POSTAGE/MAILHOUSE
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D40BFFE235A5A4DD1B3F	
Amount Incurred This Period 19.08	Payment This Period 0.00	Outstanding Balance at Close of This Period 19.08

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor VALTIM			Nature of Debt (Purpose): DIRECT MAIL POSTAGE/MAILHOUSE
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D5BA352567D4347E89EF	
Amount Incurred This Period 19.08	Payment This Period 0.00	Outstanding Balance at Close of This Period 19.08

1) SUBTOTALS This Period This Page (optional)..... ▶	57.24
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 191 OF 256
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor VALTIM			Nature of Debt (Purpose): DIRECT MAIL POSTAGE/MAILHOUSE
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DECCCE99CD41F454281A	
Amount Incurred This Period 76.32	Payment This Period 0.00	Outstanding Balance at Close of This Period 76.32

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor COLORTREE GROUP INC			Nature of Debt (Purpose): DIRECT MAIL PRINTING
Mailing Address 8000 VILLA PARK DR			
City RICHMOND	State VA	Zip Code 23228-6500	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DD3F4E8ED186C4A3B92D	
Amount Incurred This Period 264.04	Payment This Period 0.00	Outstanding Balance at Close of This Period 264.04

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor VALTIM			Nature of Debt (Purpose): DIRECT MAIL POSTAGE/MAILHOUSE
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D23D553702EC845798FD	
Amount Incurred This Period 76.32	Payment This Period 0.00	Outstanding Balance at Close of This Period 76.32

1) SUBTOTALS This Period This Page (optional)..... ▶	416.68
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 192 OF 256
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor COLORTREE GROUP INC		Nature of Debt (Purpose): DIRECT MAIL PRINTING	
Mailing Address 8000 VILLA PARK DR			
City RICHMOND	State VA	Zip Code 23228-6500	

Outstanding Balance Beginning This Period 0.00		Transaction ID : DA335ECBC375542349B0	
Amount Incurred This Period 3.22	Payment This Period 0.00	Outstanding Balance at Close of This Period 3.22	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor COLORTREE GROUP INC		Nature of Debt (Purpose): DIRECT MAIL PRINTING	
Mailing Address 8000 VILLA PARK DR			
City RICHMOND	State VA	Zip Code 23228-6500	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D86BB02B8042847E7946	
Amount Incurred This Period 3.22	Payment This Period 0.00	Outstanding Balance at Close of This Period 3.22	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor COLORTREE GROUP INC		Nature of Debt (Purpose): DIRECT MAIL PRINTING	
Mailing Address 8000 VILLA PARK DR			
City RICHMOND	State VA	Zip Code 23228-6500	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D0F56E08A9B2142C59AE	
Amount Incurred This Period 12.88	Payment This Period 0.00	Outstanding Balance at Close of This Period 12.88	

1) SUBTOTALS This Period This Page (optional)..... ▶	19.32
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 193 OF 256
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
STARS AND STRIPES FOREVER PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor VALTIM			Nature of Debt (Purpose): DIRECT MAIL PRINTING
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period		Transaction ID : D4A50867F94394F2AA1D	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="1354.09"/>	<input type="text" value="0.00"/>	<input type="text" value="1354.09"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor VALTIM			Nature of Debt (Purpose): DIRECT MAIL PRINTING
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period		Transaction ID : D40007A266D4B4FA6A5E	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="902.72"/>	<input type="text" value="0.00"/>	<input type="text" value="902.72"/>	

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

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

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="2256.81"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="14728.28"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="14728.28"/>

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC	FEC IDENTIFICATION NUMBER ▼ C C00635243
---	--

Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item SAVANNA COMMUNICATIONS	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 755 SONNE DRIVE	Amount <input type="text"/>
City ANNAPOLIS State MD Zip Code 21401-7120	4682.15
Purpose of Expenditure RADIO ADVERTISEMENT PLACEMENT/PRODUCTION Category/Type <input type="text"/>	Transaction ID : EB31DBFD1EE484A29A0E Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: BALDWIN, TAMMY, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: WI
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 15407.53	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item SAVANNA COMMUNICATIONS	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 755 SONNE DRIVE	Amount <input type="text"/>
City ANNAPOLIS State MD Zip Code 21401-7120	15042.15
Purpose of Expenditure RADIO ADVERTISEMENT PRODUCTION/PLACEMENT Category/Type <input type="text"/>	Transaction ID : E826EE582751B41B9AC1 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: KAINE, TIMOTHY, MICHAEL, , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: VA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 20077.23	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 19724.30
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , , [Electronically Filed] Date / /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee SAVANNA COMMUNICATIONS
Mailing Address 755 SONNE DRIVE
City ANNAPOLIS State MD Zip Code 21401-7120
Purpose of Expenditure RADIO ADVERTISEMENT PRODUCTION/PLACEMENT
Date of Public Distribution/Dissemination 08/01/2017
Amount 7312.15
Transaction ID : E7F56EE20C1844384818
Date of Disbursement or Obligation 08/01/2017
Name of Federal Candidate: DONNELLY, JOSEPH, S,
Office Sought: Senate State: IN
Disbursement For: General 2018

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL CREATIVE
Date of Public Distribution/Dissemination 08/02/2017
Amount 6.40
Transaction ID : EF959919D87C44B9E8AA
Date of Disbursement or Obligation 08/02/2017
Name of Federal Candidate: KAINE, TIMOTHY, MICHAEL,
Office Sought: Senate State: VA
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 7318.55
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, ,

[Electronically Filed]

Date 11/30/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee RST MARKETING
Mailing Address 1272 CORPORATE PARK ROAD
City FOREST State VA Zip Code 24551
Purpose of Expenditure DIRECT MAIL PRINTING
Name of Federal Candidate: WATERS, MAXINE, , ,
Calendar Year-To-Date Per Election for Office Sought 5452.22
Disbursement For: 2018 General

Full Name of Payee EBERLE COMMUNICATIONS GROUP
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL DATA CENTER
Name of Federal Candidate: WATERS, MAXINE, , ,
Calendar Year-To-Date Per Election for Office Sought 5452.22
Disbursement For: 2018 General

(a) SUBTOTAL of Itemized Independent Expenditures 5189.93
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

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Date 11 / 30 / 2017

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee EBERLE COMMUNICATIONS GROUP
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL DATA CENTER
Category/Type
Date of Public Distribution/Dissemination 08 / 02 / 2017
Amount 1.67
Transaction ID : E87EAF2B88428461C9C5
Date of Disbursement or Obligation 08 / 02 / 2017

Name of Federal Candidate: DONNELLY, JOSEPH, S,
Support Oppose
Office Sought: House Senate State: IN
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee EBERLE COMMUNICATIONS GROUP
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL DATA CENTER
Category/Type
Date of Public Distribution/Dissemination 08 / 02 / 2017
Amount 1.67
Transaction ID : ED0687D7AED07499BBB
Date of Disbursement or Obligation 08 / 02 / 2017

Name of Federal Candidate: BALDWIN, TAMMY, ,
Support Oppose
Office Sought: House Senate State: WI
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 3.34
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , [Electronically Filed]
Signature

Date 11 / 30 / 2017

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee RST MARKETING
Mailing Address 1272 CORPORATE PARK ROAD
City FOREST State VA Zip Code 24551
Purpose of Expenditure DIRECT MAIL PRINTING
Name of Federal Candidate: BALDWIN, TAMMY, , ,
Calendar Year-To-Date Per Election for Office Sought 15540.51
Disbursement For: 2018 General

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL CREATIVE
Name of Federal Candidate: BALDWIN, TAMMY, , ,
Calendar Year-To-Date Per Election for Office Sought 15540.51
Disbursement For: 2018 General

(a) SUBTOTAL of Itemized Independent Expenditures 131.31
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

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Date 11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee EBERLE COMMUNICATIONS GROUP
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL DATA CENTER
Date of Public Distribution/Dissemination 08/02/2017
Amount 1.67
Transaction ID: E5697BA4D4AF64DB5874
Date of Disbursement or Obligation 08/02/2017

Name of Federal Candidate: Kaine, Timothy, Michael,
Support Oppose
Office Sought: House Senate State: VA
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL CREATIVE
Date of Public Distribution/Dissemination 08/02/2017
Amount 6.40
Transaction ID: EE8DD598AFAB64D38892
Date of Disbursement or Obligation 08/02/2017

Name of Federal Candidate: Donnelly, Joseph, S,
Support Oppose
Office Sought: House Senate State: IN
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 8.07
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, ,

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Date 11/30/2017

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee RST MARKETING
Mailing Address 1272 CORPORATE PARK ROAD
City FOREST State VA Zip Code 24551
Purpose of Expenditure DIRECT MAIL PRINTING
Date of Public Distribution/Dissemination 08 / 02 / 2017
Amount 124.91
Transaction ID : E49B089A6ADB54A97815
Date of Disbursement or Obligation 08 / 02 / 2017

Name of Federal Candidate: Kaine, Timothy, Michael,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 20210.21

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL CREATIVE
Date of Public Distribution/Dissemination 08 / 02 / 2017
Amount 262.29
Transaction ID : EF5AB14F50B5F4B10997
Date of Disbursement or Obligation 08 / 02 / 2017

Name of Federal Candidate: Waters, Maxine,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 5452.22

(a) SUBTOTAL of Itemized Independent Expenditures 387.20
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID,
[Electronically Filed]
Date 11 / 30 / 2017
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee RST MARKETING
Mailing Address 1272 CORPORATE PARK ROAD
City FOREST State VA Zip Code 24551
Purpose of Expenditure DIRECT MAIL PRINTING
Name of Federal Candidate: DONNELLY, JOSEPH, S,
Calendar Year-To-Date Per Election for Office Sought 12480.21

Full Name of Payee PARAMOUNT COMMUNICATIONS
Mailing Address 525-K EAST MARKET STREET SUITE 114
City LEESBURG State VA Zip Code 20176
Purpose of Expenditure EMAIL DISTRIBUTION SERVICE
Name of Federal Candidate: WATERS, MAXINE, ,
Calendar Year-To-Date Per Election for Office Sought 6393.41

(a) SUBTOTAL of Itemized Independent Expenditures 566.11
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, ,

[Electronically Filed]

Date

11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure EMAIL CREATIVE
Name of Federal Candidate: WATERS, MAXINE, , ,
Calendar Year-To-Date Per Election for Office Sought 6393.41
Disbursement For: General 2018

Full Name of Payee SAVANNA COMMUNICATIONS
Mailing Address 755 SONNE DRIVE
City ANNAPOLIS State MD Zip Code 21401-7120
Purpose of Expenditure RADIO ADVERTISEMENT PLACEMENT
Name of Federal Candidate: DONNELLY, JOSEPH, S, ,
Calendar Year-To-Date Per Election for Office Sought 18530.21
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 6549.99
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date 11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee PARAMOUNT COMMUNICATIONS
Mailing Address 525-K EAST MARKET STREET SUITE 114
City LEESBURG State VA Zip Code 20176
Purpose of Expenditure EMAIL DISTRIBUTION SERVICE
Date of Public Distribution/Dissemination 09/12/2017
Amount 19.47
Transaction ID : EEF7CD4A1B9604E74A2E
Date of Disbursement or Obligation 09/12/2017

Name of Federal Candidate: DONNELLY, JOSEPH, S,
Support Oppose
Office Sought: House Senate State: IN
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure EMAIL CREATIVE
Date of Public Distribution/Dissemination 09/12/2017
Amount 24.76
Transaction ID : E7F2663A681884E7C8DA
Date of Disbursement or Obligation 09/12/2017

Name of Federal Candidate: DONNELLY, JOSEPH, S,
Support Oppose
Office Sought: House Senate State: IN
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 44.23
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, ,

[Electronically Filed]

Date 11/30/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure EMAIL CREATIVE
Name of Federal Candidate: WATERS, MAXINE, , ,
Calendar Year-To-Date Per Election for Office Sought 7021.44

Full Name of Payee SAVANNA COMMUNICATIONS
Mailing Address 755 SONNE DRIVE
City ANNAPOLIS State MD Zip Code 21401-7120
Purpose of Expenditure RADIO ADVERTISEMENT PLACEMENT/PRODUCTION
Name of Federal Candidate: DONNELLY, JOSEPH, S, ,
Calendar Year-To-Date Per Election for Office Sought 19801.94

(a) SUBTOTAL of Itemized Independent Expenditures 1579.07
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date 11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on 09/12/2017

Full Name of Payee PARAMOUNT COMMUNICATIONS
Mailing Address 525-K EAST MARKET STREET SUITE 114
City LEESBURG State VA Zip Code 20176
Purpose of Expenditure EMAIL DISTRIBUTION SERVICE
Name of Federal Candidate: BALDWIN, TAMMY, , ,
Calendar Year-To-Date Per Election for Office Sought 20232.24
Disbursement For: General 2018

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure EMAIL CREATIVE
Name of Federal Candidate: BALDWIN, TAMMY, , ,
Calendar Year-To-Date Per Election for Office Sought 20232.24
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 44.23
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date 11/30/2017

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC	FEC IDENTIFICATION NUMBER ▼ C C00635243
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item SAVANNA COMMUNICATIONS		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 755 SONNE DRIVE		Amount <input type="text"/>	
City ANNAPOLIS	State MD	Zip Code 21401-7120	Transaction ID : ECA61B33C301A4489AC6
Purpose of Expenditure RADIO ADVERTISEMENT PLACEMENT/PRODUCTION		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: BALDWIN, TAMMY, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WI
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item PARAMOUNT COMMUNICATIONS		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 525-K EAST MARKET STREET SUITE 114		Amount <input type="text"/>	
City LEESBURG	State VA	Zip Code 20176	Transaction ID : E9319B0F56EF548F7847
Purpose of Expenditure EMAIL DISTRIBUTION SERVICE		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: WATERS, MAXINE, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 43 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date / /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC	FEC IDENTIFICATION NUMBER ▼ C C00635243
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee ACTION MAILERS <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 90 COMMERCE DRIVE		Amount <input type="text"/>	
City ASTON	State PA	Zip Code 19014-3201	Transaction ID : EC5520449DAC24BEAA70
Purpose of Expenditure DIRECT MAIL PRINTING (ORIGINAL AMOUNT OF \$188.14 ESTIMATED)		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: BALDWIN, TAMMY, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>WI</u>	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 20338.57		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee EBERLE COMMUNICATIONS GROUP <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1420 SPRING HILL ROAD SUITE 490		Amount <input type="text"/>	
City MCLEAN	State VA	Zip Code 22102-3028	Transaction ID : E83883F19B60D4E7A81F
Purpose of Expenditure DIRECT MAIL DATA CENTER		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: WATERS, MAXINE, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>43</u> State: <u>CA</u>	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 7203.20		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 68.84
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , , [Electronically Filed] Date / /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL CREATIVE
Name of Federal Candidate: DONNELLY, JOSEPH, S,
Calendar Year-To-Date Per Election for Office Sought 19908.27
Disbursement For: General 2018

Full Name of Payee EBERLE COMMUNICATIONS GROUP
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL DATA CENTER
Name of Federal Candidate: DONNELLY, JOSEPH, S,
Calendar Year-To-Date Per Election for Office Sought 19908.27
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 12.80
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, ,

[Electronically Filed]

Date 11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee EBERLE COMMUNICATIONS GROUP
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL DATA CENTER
Name of Federal Candidate: BALDWIN, TAMMY, , ,
Calendar Year-To-Date Per Election for Office Sought 20338.57
Disbursement For: General 2018

Full Name of Payee ACTION MAILERS
Mailing Address 90 COMMERCE DRIVE
City ASTON State PA Zip Code 19014-3201
Purpose of Expenditure DIRECT MAIL PRINTING (ORIGINAL AMOUNT OF \$188.14 ESTIMATED)
Name of Federal Candidate: DONNELLY, JOSEPH, S, ,
Calendar Year-To-Date Per Election for Office Sought 19908.27
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 4.85
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date 11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL CREATIVE
Name of Federal Candidate: WATERS, MAXINE, , ,
Office Sought: House District: 43 State: CA
Disbursement For: General 2018

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL CREATIVE
Name of Federal Candidate: BALDWIN, TAMMY, , ,
Office Sought: Senate State: WI
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 120.87
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

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Date 11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on 10/03/2017

Full Name of Payee ACTION MAILERS Memo Item
Mailing Address 90 COMMERCE DRIVE
City ASTON State PA Zip Code 19014-3201
Purpose of Expenditure DIRECT MAIL PRINTING Category/Type
Name of Federal Candidate: MCCASKILL, CLAIRE, , , Support Oppose Office Sought: House Senate State: MO
Calendar Year-To-Date Per Election for Office Sought 5193.61 Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee OMEGA LIST COMPANY Memo Item
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure LIST RENTAL Category/Type
Name of Federal Candidate: WATERS, MAXINE, , , Support Oppose Office Sought: House Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 18666.09 Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1066.62
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , , [Electronically Filed] Date 11/30/2017
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee ACTION MAILERS Memo Item
Mailing Address 90 COMMERCE DRIVE
City ASTON State PA Zip Code 19014-3201
Purpose of Expenditure DIRECT MAIL PRINTING Category/Type
Name of Federal Candidate: TESTER, JON, , Support Oppose Office Sought: House Senate State: MT
Calendar Year-To-Date Per Election for Office Sought 4695.43
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee CAMPAIGN FUNDING DIRECT Memo Item
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL CREATIVE Category/Type
Name of Federal Candidate: DONNELLY, JOSEPH, S, Support Oppose Office Sought: House Senate State: IN
Calendar Year-To-Date Per Election for Office Sought 20265.97
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 68.92
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, ,

[Electronically Filed]

Date 11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee ACTION MAILERS Memo Item
Mailing Address 90 COMMERCE DRIVE
City ASTON State PA Zip Code 19014-3201
Purpose of Expenditure DIRECT MAIL PRINTING (ORIGINAL AMOUNT OF \$509.45 ESTIMATED)
Name of Federal Candidate: BALDWIN, TAMMY, , , Support Oppose
Office Sought: House Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 20696.27
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee ACTION MAILERS Memo Item
Mailing Address 90 COMMERCE DRIVE
City ASTON State PA Zip Code 19014-3201
Purpose of Expenditure DIRECT MAIL PRINTING
Name of Federal Candidate: CASEY, ROBERT P, JR, , Support Oppose
Office Sought: House Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 5156.20
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , , [Electronically Filed] Date 11 / 30 / 2017
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee ACTION MAILERS Memo Item
Mailing Address 90 COMMERCE DRIVE
City ASTON State PA Zip Code 19014-3201
Purpose of Expenditure DIRECT MAIL PRINTING (ORIGINAL AMOUNT OF \$14,434.43 ESTIMATED)
Name of Federal Candidate: WATERS, MAXINE, , , Support Oppose Office Sought: House District: 43 State: CA
Calendar Year-To-Date Per Election for Office Sought 18666.09 Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee CAMPAIGN FUNDING DIRECT Memo Item
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL CREATIVE
Name of Federal Candidate: WATERS, MAXINE, , , Support Oppose Office Sought: House District: 43 State: CA
Calendar Year-To-Date Per Election for Office Sought 18666.09 Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1952.86
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date

11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee ACTION MAILERS Memo Item
Mailing Address 90 COMMERCE DRIVE
City ASTON State PA Zip Code 19014-3201
Purpose of Expenditure DIRECT MAIL PRINTING Category/Type
Name of Federal Candidate: BROWN, SHERROD, , Support Oppose Office Sought: House Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 5156.20 Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee ACTION MAILERS Memo Item
Mailing Address 90 COMMERCE DRIVE
City ASTON State PA Zip Code 19014-3201
Purpose of Expenditure DIRECT MAIL PRINTING (ORIGINAL AMOUNT OF \$509.45 ESTIMATED) Category/Type
Name of Federal Candidate: DONNELLY, JOSEPH, S, Support Oppose Office Sought: House Senate State: IN
Calendar Year-To-Date Per Election for Office Sought 20265.97 Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, ,

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Date

11 / 30 / 2017

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee ACTION MAILERS Memo Item
Mailing Address 90 COMMERCE DRIVE
City ASTON State PA Zip Code 19014-3201
Purpose of Expenditure DIRECT MAIL PRINTING Category/Type
Name of Federal Candidate: STABENOW, DEBBIE, , , Support Oppose Office Sought: House Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 5156.20 Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee CAMPAIGN FUNDING DIRECT Memo Item
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL CREATIVE Category/Type
Name of Federal Candidate: BALDWIN, TAMMY, , , Support Oppose Office Sought: House Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 20696.27 Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 68.92
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

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Date 11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee ACTION MAILERS Memo Item
Mailing Address 90 COMMERCE DRIVE
City ASTON State PA Zip Code 19014-3201
Purpose of Expenditure DIRECT MAIL PRINTING
Name of Federal Candidate: Kaine, Timothy, Michael, Oppose
Office Sought: Senate State: VA
Calendar Year-To-Date Per Election for Office Sought 20554.87
Disbursement For: General 2018

Full Name of Payee ACTION MAILERS Memo Item
Mailing Address 90 COMMERCE DRIVE
City ASTON State PA Zip Code 19014-3201
Purpose of Expenditure DIRECT MAIL PRINTING (ORIGINAL AMOUNT OF \$2,671.63 ESTIMATED)
Name of Federal Candidate: Waters, Maxine, Oppose
Office Sought: House District: 43 State: CA
Calendar Year-To-Date Per Election for Office Sought 18666.09
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, ,

[Electronically Filed]

Date

11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee ACTION MAILERS Memo Item
Mailing Address 90 COMMERCE DRIVE
City ASTON State PA Zip Code 19014-3201
Purpose of Expenditure DIRECT MAIL PRINTING Category/Type
Name of Federal Candidate: HEITKAMP, HEIDI, , , Support Oppose Office Sought: House Senate State: ND
Calendar Year-To-Date Per Election for Office Sought 4695.43 Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee OMEGA LIST COMPANY Memo Item
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure LIST RENTAL Category/Type
Name of Federal Candidate: BALDWIN, TAMMY, , , Support Oppose Office Sought: House Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 20696.27 Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 37.65
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date 11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee OMEGA LIST COMPANY
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure LIST RENTAL
Date of Public Distribution/Dissemination 10/03/2017
Amount 37.65
Transaction ID : E069553CE0F064A7EAE2
Date of Disbursement or Obligation 10/03/2017

Name of Federal Candidate: DONNELLY, JOSEPH, S,
Support Oppose
Office Sought: House Senate State: IN
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee PARAMOUNT COMMUNICATIONS
Mailing Address 525-K EAST MARKET STREET SUITE 114
City LEESBURG State VA Zip Code 20176
Purpose of Expenditure EMAIL DISTRIBUTION SERVICE
Date of Public Distribution/Dissemination 10/04/2017
Amount 22.54
Transaction ID : E059A8235A97A4CD99AC
Date of Disbursement or Obligation 10/04/2017

Name of Federal Candidate: BALDWIN, TAMMY, ,
Support Oppose
Office Sought: House Senate State: WI
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 60.19
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , [Electronically Filed] Date 11/30/2017
Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC	FEC IDENTIFICATION NUMBER ▼ C C00635243
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee CAMPAIGN FUNDING DIRECT <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1420 SPRING HILL ROAD, SUITE 490		Amount <input type="text"/>	
City MCLEAN	State VA	Zip Code 22102-3028	Transaction ID : E1C727D4E1FA04F089DE
Purpose of Expenditure EMAIL CREATIVE		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: BALDWIN, TAMMY, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>WI</u>	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 20738.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee PARAMOUNT COMMUNICATIONS <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 525-K EAST MARKET STREET SUITE 114		Amount <input type="text"/>	
City LEESBURG	State VA	Zip Code 20176	Transaction ID : ECBB40D81FD194211B98
Purpose of Expenditure EMAIL DISTRIBUTION SERVICE		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: DONNELLY, JOSEPH, S, , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>IN</u>	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 20308.19		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 42.22
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , , *[Electronically Filed]* Date / /
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure EMAIL CREATIVE
Date of Public Distribution/Dissemination 10/04/2017
Amount 19.68
Transaction ID : EB5A943246A3E45E2A58
Date of Disbursement or Obligation 10/04/2017

Name of Federal Candidate: DONNELLY, JOSEPH, S,
Support Oppose
Office Sought: House Senate State: IN
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee SAVANNA COMMUNICATIONS
Mailing Address 755 SONNE DRIVE
City ANNAPOLIS State MD Zip Code 21401-7120
Purpose of Expenditure RADIO ADVERTISEMENT PRODUCTION/PLACEMENT
Date of Public Distribution/Dissemination 10/10/2017
Amount 3420.00
Transaction ID : EE395286D67C14C3F8F2
Date of Disbursement or Obligation 10/10/2017

Name of Federal Candidate: BALDWIN, TAMMY, ,
Support Oppose
Office Sought: House Senate State: WI
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 3439.68
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, ,
Signature

[Electronically Filed]

Date 11/30/2017

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee SAVANNA COMMUNICATIONS
Mailing Address 755 SONNE DRIVE
City ANNAPOLIS State MD Zip Code 21401-7120
Purpose of Expenditure RADIO ADVERTISEMENT PLACEMENT/PRODUCTION
Name of Federal Candidate: DONNELLY, JOSEPH, S,
Calendar Year-To-Date Per Election for Office Sought 26358.19
Disbursement For: General 2018

Full Name of Payee EBERLE COMMUNICATIONS GROUP
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL DATA CENTER
Name of Federal Candidate: DONNELLY, JOSEPH, S,
Calendar Year-To-Date Per Election for Office Sought 26461.26
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 6055.22
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, ,

[Electronically Filed]

Date

11 / 30 / 2017

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00635243 </div>
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Check if 24-hour report 48-hour report ➤ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item VALTIM	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 17 / 2017
Mailing Address P.O. BOX 809 1095 VENTURE DR	Amount <div style="border: 1px solid gray; padding: 2px; display: inline-block;"> 76.32 </div> Transaction ID : E09A27004F9944216B00 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
City State Zip Code FOREST VA 24551-0809	
Purpose of Expenditure DIRECT MAIL POSTAGE/MAILHOUSE (ORIGINAL AMOUNT OF \$179.15 ESTIMATED)	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose DONNELLY, JOSEPH, S, ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IN
Calendar Year-To-Date Per Election for Office Sought 26461.26 	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item RST MARKETING	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 17 / 2017
Mailing Address 1272 CORPORATE PARK ROAD	Amount <div style="border: 1px solid gray; padding: 2px; display: inline-block;"> 124.91 </div> Transaction ID : E6BE16A8F81934B148D9 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 17 / 2017
City State Zip Code FOREST VA 24551	
Purpose of Expenditure DIRECT MAIL PRINTING	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose TESTER, JON, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MT
Calendar Year-To-Date Per Election for Office Sought 4923.07 	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid gray; padding: 2px; display: inline-block;"> 124.91 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid gray; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid gray; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature SATTERFIELD, DAVID, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
 11 / 30 / 2017

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee COLORTREE GROUP INC
Mailing Address 8000 VILLA PARK DR
City RICHMOND State VA Zip Code 23228-6500
Purpose of Expenditure DIRECT MAIL PRINTING
Name of Federal Candidate: MCCASKILL, CLAIRE, , ,
Calendar Year-To-Date Per Election for Office Sought 5444.05

Full Name of Payee PARAMOUNT COMMUNICATIONS
Mailing Address 525-K EAST MARKET STREET SUITE 114
City LEESBURG State VA Zip Code 20176
Purpose of Expenditure EMAIL DISTRIBUTION SERVICE
Name of Federal Candidate: STABENOW, DEBBIE, , ,
Calendar Year-To-Date Per Election for Office Sought 5383.84

(a) SUBTOTAL of Itemized Independent Expenditures 13.42
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date 11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee PARAMOUNT COMMUNICATIONS
Mailing Address 525-K EAST MARKET STREET SUITE 114
City LEESBURG State VA Zip Code 20176
Purpose of Expenditure EMAIL DISTRIBUTION SERVICE
Name of Federal Candidate: MCCASKILL, CLAIRE, , ,
Calendar Year-To-Date Per Election for Office Sought 5444.05
Disbursement For: 2018 General

Full Name of Payee COLORTREE GROUP INC
Mailing Address 8000 VILLA PARK DR
City RICHMOND State VA Zip Code 23228-6500
Purpose of Expenditure DIRECT MAIL PRINTING
Name of Federal Candidate: MOORE, ROY, , ,
Calendar Year-To-Date Per Election for Office Sought 1828.55
Disbursement For: 2018 General

(a) SUBTOTAL of Itemized Independent Expenditures 21.21
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date 11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee PARAMOUNT COMMUNICATIONS
Mailing Address 525-K EAST MARKET STREET SUITE 114
City LEESBURG State VA Zip Code 20176
Purpose of Expenditure EMAIL DISTRIBUTION SERVICE
Date of Public Distribution/Dissemination 10/17/2017
Amount 13.42
Transaction ID : E211CFB4AF97C4717AC9
Date of Disbursement or Obligation 10/17/2017

Name of Federal Candidate: BROWN, SHERROD, , ,
Support Oppose
Office Sought: House Senate State: OH
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee PARAMOUNT COMMUNICATIONS
Mailing Address 525-K EAST MARKET STREET SUITE 114
City LEESBURG State VA Zip Code 20176
Purpose of Expenditure EMAIL DISTRIBUTION SERVICE
Date of Public Distribution/Dissemination 10/17/2017
Amount 13.42
Transaction ID : EDC577A1E333F42AAA36
Date of Disbursement or Obligation 10/17/2017

Name of Federal Candidate: CASEY, ROBERT P, JR, ,
Support Oppose
Office Sought: House Senate State: PA
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 26.84
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , , [Electronically Filed] Date 11/30/2017
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee COLORTREE GROUP INC
Mailing Address 8000 VILLA PARK DR
City RICHMOND State VA Zip Code 23228-6500
Purpose of Expenditure DIRECT MAIL PRINTING
Name of Federal Candidate: CASEY, ROBERT P, JR,
Disbursement For: General 2018

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL CREATIVE
Name of Federal Candidate: KAINE, TIMOTHY, MICHAEL,
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 129.97
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, ,

[Electronically Filed]

Date 11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee EBERLE COMMUNICATIONS GROUP
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL DATA CENTER
Category/Type
Date of Public Distribution/Dissemination 10/17/2017
Amount 4.92
Transaction ID : E039AA3E0DC8D4BF5BE1
Date of Disbursement or Obligation 10/17/2017

Name of Federal Candidate: CASEY, ROBERT P, JR,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 5383.84

Full Name of Payee EBERLE COMMUNICATIONS GROUP
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL DATA CENTER
Category/Type
Date of Public Distribution/Dissemination 10/17/2017
Amount 4.92
Transaction ID : EEABC06AF2CC644B7AB
Date of Disbursement or Obligation 10/17/2017

Name of Federal Candidate: TESTER, JON,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 4923.07

(a) SUBTOTAL of Itemized Independent Expenditures 9.84
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, ,

[Electronically Filed]

Date

11/30/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on 10/17/2017

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL CREATIVE
Name of Federal Candidate: DONNELLY, JOSEPH, S,
Calendar Year-To-Date Per Election for Office Sought 26461.26
Disbursement For: General 2018

Full Name of Payee VALTIM
Mailing Address P.O. BOX 809
1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL POSTAGE/MAILHOUSE
Name of Federal Candidate: BALDWIN, TAMMY, ,
Calendar Year-To-Date Per Election for Office Sought 24261.56
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 8.65
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, ,

[Electronically Filed]

Date

11/30/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee VALTIM Memo Item
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL POSTAGE/MAILHOUSE
Name of Federal Candidate: Kaine, Timothy, Michael, Support Oppose
Office Sought: House Senate State: VA
Calendar Year-To-Date Per Election for Office Sought 20863.77
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee COLORTREE GROUP INC Memo Item
Mailing Address 8000 VILLA PARK DR
City RICHMOND State VA Zip Code 23228-6500
Purpose of Expenditure DIRECT MAIL PRINTING
Name of Federal Candidate: Tester, Jon, Support Oppose
Office Sought: House Senate State: MT
Calendar Year-To-Date Per Election for Office Sought 4923.07
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, ,

[Electronically Filed]

Date 11 / 30 / 2017

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC	FEC IDENTIFICATION NUMBER ▼ C C00635243
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee VALTIM <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address P.O. BOX 809 1095 VENTURE DR		Amount <input type="text"/>	
City FOREST	State VA	Zip Code 24551-0809	Transaction ID : E2273834B2FEB4485B33
Purpose of Expenditure DIRECT MAIL POSTAGE/MAILHOUSE		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: MOORE, ROY, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>AL</u>	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1828.55		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee COLORTREE GROUP INC <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 8000 VILLA PARK DR		Amount <input type="text"/>	
City RICHMOND	State VA	Zip Code 23228-6500	Transaction ID : E70EC0BB740DF4BBAAF
Purpose of Expenditure DIRECT MAIL PRINTING		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: STABENOW, DEBBIE, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>MI</u>	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 5383.84		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	<input type="text"/> 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	<input type="text"/>
(c) TOTAL Independent Expenditures	▶	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date

/ /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee OMEGA LIST COMPANY
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure LIST RENTAL
Date of Public Distribution/Dissemination 10/17/2017
Amount 12.55
Transaction ID : E8F11C64741034769B87
Date of Disbursement or Obligation 10/17/2017

Name of Federal Candidate: HEITKAMP, HEIDI, , ,
Support Oppose
Office Sought: House Senate State: ND
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee RST MARKETING
Mailing Address 1272 CORPORATE PARK ROAD
City FOREST State VA Zip Code 24551
Purpose of Expenditure DIRECT MAIL PRINTING
Date of Public Distribution/Dissemination 10/17/2017
Amount 124.91
Transaction ID : E4E35FAE5EFB3472A893
Date of Disbursement or Obligation 10/17/2017

Name of Federal Candidate: MCCASKILL, CLAIRE, , ,
Support Oppose
Office Sought: House Senate State: MO
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 137.46
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date

11/30/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee COLORTREE GROUP INC
Mailing Address 8000 VILLA PARK DR
City RICHMOND State VA Zip Code 23228-6500
Purpose of Expenditure DIRECT MAIL PRINTING
Name of Federal Candidate: BALDWIN, TAMMY, , ,
Calendar Year-To-Date Per Election for Office Sought 24261.56

Full Name of Payee EBERLE COMMUNICATIONS GROUP
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL DATA CENTER
Name of Federal Candidate: BROWN, SHERROD, , ,
Calendar Year-To-Date Per Election for Office Sought 5383.84

(a) SUBTOTAL of Itemized Independent Expenditures 4.92
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date 11 / 30 / 2017

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00635243 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item PARAMOUNT COMMUNICATIONS	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 17 / 2017
Mailing Address 525-K EAST MARKET STREET SUITE 114	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> M M / D D / Y Y Y Y Y Y 42.01 </div> Transaction ID : EDE8B9C58CFD042E195E Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 17 / 2017
City State Zip Code LEESBURG VA 20176	
Purpose of Expenditure EMAIL DISTRIBUTION SERVICE	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Kaine, Timothy, Michael, ,	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: VA
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> M M / D D / Y Y Y Y Y Y 20863.77 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input checked="" type="checkbox"/> Memo Item VALTIM	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 17 / 2017
Mailing Address P.O. BOX 809 1095 VENTURE DR	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> M M / D D / Y Y Y Y Y Y 19.08 </div> Transaction ID : EFC53288994D94D96BC2 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 17 / 2017
City State Zip Code FOREST VA 24551-0809	
Purpose of Expenditure DIRECT MAIL POSTAGE/MAILHOUSE	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Brown, Sherrod, ,	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> M M / D D / Y Y Y Y Y Y 5383.84 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> M M / D D / Y Y Y Y Y Y 42.01 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> M M / D D / Y Y Y Y Y Y _____ </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> M M / D D / Y Y Y Y Y Y _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature SATTERFIELD, DAVID, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
 11 / 30 / 2017

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL CREATIVE
Name of Federal Candidate: STABENOW, DEBBIE, , ,
Calendar Year-To-Date Per Election for Office Sought 5383.84
Disbursement For: General 2018

Full Name of Payee RST MARKETING
Mailing Address 1272 CORPORATE PARK ROAD
City FOREST State VA Zip Code 24551
Purpose of Expenditure DIRECT MAIL PRINTING
Name of Federal Candidate: HEITKAMP, HEIDI, , ,
Calendar Year-To-Date Per Election for Office Sought 4923.07
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 174.45
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date 11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee COLORTREE GROUP INC
Mailing Address 8000 VILLA PARK DR
City RICHMOND State VA Zip Code 23228-6500
Purpose of Expenditure DIRECT MAIL PRINTING
Name of Federal Candidate: HEITKAMP, HEIDI, ,
Calendar Year-To-Date Per Election for Office Sought 4923.07

Full Name of Payee OMEGA LIST COMPANY
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure LIST RENTAL
Name of Federal Candidate: BROWN, SHERROD, ,
Calendar Year-To-Date Per Election for Office Sought 5383.84

(a) SUBTOTAL of Itemized Independent Expenditures 12.55
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, ,

[Electronically Filed]

Date 11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee EBERLE COMMUNICATIONS GROUP
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL DATA CENTER
Name of Federal Candidate: MCCASKILL, CLAIRE, , ,
Calendar Year-To-Date Per Election for Office Sought 5444.05
Disbursement For: General 2018

Full Name of Payee OMEGA LIST COMPANY
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure LIST RENTAL
Name of Federal Candidate: STABENOW, DEBBIE, , ,
Calendar Year-To-Date Per Election for Office Sought 5383.84
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 19.40
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date 11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee RST MARKETING
Mailing Address 1272 CORPORATE PARK ROAD
City FOREST State VA Zip Code 24551
Purpose of Expenditure DIRECT MAIL PRINTING
Name of Federal Candidate: CASEY, ROBERT P, JR,
Calendar Year-To-Date Per Election for Office Sought 5383.84
Disbursement For: General 2018

Full Name of Payee VALTIM
Mailing Address P.O. BOX 809
1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL POSTAGE/MAILHOUSE
Name of Federal Candidate: MCCASKILL, CLAIRE,
Calendar Year-To-Date Per Election for Office Sought 5444.05
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 124.91
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date 11 / 30 / 2017

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00635243 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item EBERLE COMMUNICATIONS GROUP		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 10 / 17 / 2017 </div>
Mailing Address 1420 SPRING HILL ROAD SUITE 490		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;"> 4.92 </div>
City MCLEAN	State VA	
Zip Code 22102-3028	Purpose of Expenditure DIRECT MAIL DATA CENTER	Category/Type
Name of Federal Candidate: HEITKAMP, HEIDI, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ <input type="checkbox"/> State: ND
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> 4923.07 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item PARAMOUNT COMMUNICATIONS		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 10 / 17 / 2017 </div>
Mailing Address 525-K EAST MARKET STREET SUITE 114		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;"> 13.42 </div>
City LEESBURG	State VA	
Zip Code 20176	Purpose of Expenditure EMAIL DISTRIBUTION SERVICE	Category/Type
Name of Federal Candidate: TESTER, JON, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ <input type="checkbox"/> State: MT
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> 4923.07 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;"> 18.34 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;"> _____ </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

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

11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL CREATIVE
Name of Federal Candidate: TESTER, JON, , ,
Calendar Year-To-Date Per Election for Office Sought 4923.07
Disbursement For: General 2018

Full Name of Payee OMEGA LIST COMPANY
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure LIST RENTAL
Name of Federal Candidate: KAINE, TIMOTHY, MICHAEL, ,
Calendar Year-To-Date Per Election for Office Sought 20863.77
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 87.19
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , , [Electronically Filed] Date 11 / 30 / 2017
Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC	FEC IDENTIFICATION NUMBER ▼ C C00635243
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee PARAMOUNT COMMUNICATIONS <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 525-K EAST MARKET STREET SUITE 114		Amount <input type="text"/>	
City LEESBURG	State VA	Zip Code 20176	Transaction ID : E6FA407AB57E24525A13
Purpose of Expenditure EMAIL DISTRIBUTION SERVICE		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: HEITKAMP, HEIDI, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>ND</u>	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 4923.07		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee CAMPAIGN FUNDING DIRECT <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1420 SPRING HILL ROAD, SUITE 490		Amount <input type="text"/>	
City MCLEAN	State VA	Zip Code 22102-3028	Transaction ID : E290DB5AC7D3E4AB4BF
Purpose of Expenditure DIRECT MAIL CREATIVE		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: CASEY, ROBERT P, JR, , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>PA</u>	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 5383.84		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 62.96
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , , *[Electronically Filed]* Date / /
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee OMEGA LIST COMPANY
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure LIST RENTAL
Date of Public Distribution/Dissemination 10/17/2017
Amount 12.55
Transaction ID: E921ECCEF04F040438C1
Date of Disbursement or Obligation 10/17/2017

Name of Federal Candidate: CASEY, ROBERT P, JR,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 5383.84

Full Name of Payee VALTIM
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL POSTAGE/MAILHOUSE
Date of Public Distribution/Dissemination 10/17/2017
Amount 19.08
Transaction ID: E18AF5C2070B64D51B22
Date of Disbursement or Obligation

Name of Federal Candidate: TESTER, JON,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 4923.07

(a) SUBTOTAL of Itemized Independent Expenditures 12.55
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, ,

[Electronically Filed]

Date 11/30/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee RST MARKETING
Mailing Address 1272 CORPORATE PARK ROAD
City FOREST State VA Zip Code 24551
Purpose of Expenditure DIRECT MAIL PRINTING
Name of Federal Candidate: BROWN, SHERROD, , ,
Calendar Year-To-Date Per Election for Office Sought 5383.84
Disbursement For: General 2018

Full Name of Payee VALTIM
Mailing Address P.O. BOX 809
1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL POSTAGE/MAILHOUSE
Name of Federal Candidate: HEITKAMP, HEIDI, , ,
Calendar Year-To-Date Per Election for Office Sought 4923.07
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 124.91
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date

11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL CREATIVE
Date of Public Distribution/Dissemination 10/17/2017
Amount 62.62
Transaction ID : E6027112412244B9AAAA
Date of Disbursement or Obligation 10/17/2017

Name of Federal Candidate: MCCASKILL, CLAIRE, , ,
Support Oppose
Office Sought: House Senate State: MO
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL CREATIVE
Date of Public Distribution/Dissemination 10/17/2017
Amount 49.54
Transaction ID : E50F1C40B274445BEB79
Date of Disbursement or Obligation 10/17/2017

Name of Federal Candidate: BROWN, SHERROD, , ,
Support Oppose
Office Sought: House Senate State: OH
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 112.16
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , , [Electronically Filed] Date 11/30/2017
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee VALTIM Memo Item
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL POSTAGE/MAILHOUSE
Name of Federal Candidate: STABENOW, DEBBIE, , , Support Oppose
Office Sought: House Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 5383.84
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee EBERLE COMMUNICATIONS GROUP Memo Item
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL DATA CENTER
Name of Federal Candidate: STABENOW, DEBBIE, , , Support Oppose
Office Sought: House Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 5383.84
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 4.92
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date

11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee EBERLE COMMUNICATIONS GROUP
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL DATA CENTER
Name of Federal Candidate: BALDWIN, TAMMY, , ,
Calendar Year-To-Date Per Election for Office Sought 24261.56
Disbursement For: General 2018

Full Name of Payee COLORTREE GROUP INC
Mailing Address 8000 VILLA PARK DR
City RICHMOND State VA Zip Code 23228-6500
Purpose of Expenditure DIRECT MAIL PRINTING
Name of Federal Candidate: KAINE, TIMOTHY, MICHAEL, ,
Calendar Year-To-Date Per Election for Office Sought 20863.77
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 5.22
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date 11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee COLORTREE GROUP INC
Mailing Address 8000 VILLA PARK DR
City RICHMOND State VA Zip Code 23228-6500
Purpose of Expenditure DIRECT MAIL PRINTING (ORIGINAL AMOUNT \$35 ESTIMATED)
Name of Federal Candidate: DONNELLY, JOSEPH, S,
Calendar Year-To-Date Per Election for Office Sought 26461.26

Full Name of Payee OMEGA LIST COMPANY
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure LIST RENTAL
Name of Federal Candidate: MCCASKILL, CLAIRE, ,
Calendar Year-To-Date Per Election for Office Sought 5444.05

(a) SUBTOTAL of Itemized Independent Expenditures 12.55
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, ,

[Electronically Filed]

Date 11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee RST MARKETING
Mailing Address 1272 CORPORATE PARK ROAD
City FOREST State VA Zip Code 24551
Purpose of Expenditure DIRECT MAIL PRINTING
Name of Federal Candidate: STABENOW, DEBBIE, , ,
Calendar Year-To-Date Per Election for Office Sought 5383.84
Disbursement For: General 2018

Full Name of Payee COLORTREE GROUP INC
Mailing Address 8000 VILLA PARK DR
City RICHMOND State VA Zip Code 23228-6500
Purpose of Expenditure DIRECT MAIL PRINTING
Name of Federal Candidate: BROWN, SHERROD, , ,
Calendar Year-To-Date Per Election for Office Sought 5383.84
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 124.91
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date 11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee EBERLE COMMUNICATIONS GROUP
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL DATA CENTER
Category/Type
Date of Public Distribution/Dissemination 10/17/2017
Amount 10.07
Transaction ID : EA18F80C13A114DFCACC
Date of Disbursement or Obligation 10/17/2017

Name of Federal Candidate: Kaine, Timothy, Michael,
Support Oppose
Office Sought: House Senate State: VA
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee OMEGA LIST COMPANY
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure LIST RENTAL
Category/Type
Date of Public Distribution/Dissemination 10/17/2017
Amount 12.55
Transaction ID : E9FACBB81144E4C59A7/
Date of Disbursement or Obligation 10/17/2017

Name of Federal Candidate: Tester, Jon,
Support Oppose
Office Sought: House Senate State: MT
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 22.62
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, Signature [Electronically Filed] Date 11/30/2017

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL CREATIVE
Name of Federal Candidate: HEITKAMP, HEIDI, , ,
Calendar Year-To-Date Per Election for Office Sought 4923.07
Disbursement For: 2018 General

Full Name of Payee VALTIM
Mailing Address P.O. BOX 809
1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL POSTAGE/MAILHOUSE
Name of Federal Candidate: CASEY, ROBERT P, JR, ,
Calendar Year-To-Date Per Election for Office Sought 5383.84
Disbursement For: 2018 General

(a) SUBTOTAL of Itemized Independent Expenditures 49.54
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date 11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL CREATIVE
Name of Federal Candidate: BALDWIN, TAMMY, , ,
Calendar Year-To-Date Per Election for Office Sought 24261.56
Disbursement For: General 2018

Full Name of Payee LAMAR
Mailing Address 1121 S. BOYLE AVE.
City LOS ANGELES State CA Zip Code 90023-2150
Purpose of Expenditure BILLBOARD ADVERTISEMENT PLACEMENT
Name of Federal Candidate: WATERS, MAXINE, , ,
Calendar Year-To-Date Per Election for Office Sought 22476.09
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 3468.65
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date 11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee DANIEL CLARK ART
Mailing Address 7141 EGGBORNSVILLE RD
City RIXEYVILLE State VA Zip Code 22737-1722
Purpose of Expenditure BILLBOARD ADVERTISEMENT PRODUCTION
Name of Federal Candidate: WATERS, MAXINE, , ,
Calendar Year-To-Date Per Election for Office Sought 22476.09

Full Name of Payee PARAMOUNT COMMUNICATIONS
Mailing Address 525-K EAST MARKET STREET SUITE 114
City LEESBURG State VA Zip Code 20176
Purpose of Expenditure EMAIL DISTRIBUTION SERVICE
Name of Federal Candidate: WATERS, MAXINE, , ,
Calendar Year-To-Date Per Election for Office Sought 22625.37

(a) SUBTOTAL of Itemized Independent Expenditures 499.28
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date 11 / 30 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee VALTIM Memo Item
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL PRINTING Category/Type
Date of Public Distribution/Dissemination 11/10/2017
Amount 1354.09
Transaction ID : E70294A145E46420CA3C
Date of Disbursement or Obligation

Name of Federal Candidate: MOORE, ROY, , , Support Oppose
Office Sought: House District: Senate State: AL
Calendar Year-To-Date Per Election for Office Sought 3182.64
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee VALTIM Memo Item
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL PRINTING Category/Type
Date of Public Distribution/Dissemination 11/10/2017
Amount 902.72
Transaction ID : ED05B7051FF754D6AAA7
Date of Disbursement or Obligation

Name of Federal Candidate: WATERS, MAXINE, , , Support Oppose
Office Sought: House District: 43 State: CA
Calendar Year-To-Date Per Election for Office Sought 23830.13
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date

11/30/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on 11/10/2017

Full Name of Payee EBERLE COMMUNICATIONS GROUP
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL DATA CENTER
Name of Federal Candidate: WATERS, MAXINE, , ,
Office Sought: House District: 43 State: CA
Disbursement For: General 2018
Amount 21.79
Transaction ID: ECA67D4E2243D4C8CB0C
Date of Disbursement or Obligation 11/10/2017

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL CREATIVE
Name of Federal Candidate: WATERS, MAXINE, , ,
Office Sought: House District: 43 State: CA
Disbursement For: General 2018
Amount 280.25
Transaction ID: E7F5A86177EB4439892F
Date of Disbursement or Obligation 11/10/2017

(a) SUBTOTAL of Itemized Independent Expenditures 302.04
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date 11/30/2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on 11/14/2017

Full Name of Payee PARAMOUNT COMMUNICATIONS
Mailing Address 525-K EAST MARKET STREET SUITE 114
City LEESBURG State VA Zip Code 20176
Purpose of Expenditure EMAIL DISTRIBUTION SERVICE
Name of Federal Candidate: MOORE, ROY, , , Support
Date of Public Distribution/Dissemination 11/14/2017
Amount 1017.35
Transaction ID : EF1045003647042DBBF5
Date of Disbursement or Obligation 11/14/2017
Calendar Year-To-Date Per Election for Office Sought 5685.90
Disbursement For: General 2018

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL CREATIVE
Name of Federal Candidate: MOORE, ROY, , , Support
Date of Public Distribution/Dissemination 11/14/2017
Amount 1485.91
Transaction ID : E6C357918156D43C8B0F
Date of Disbursement or Obligation 11/14/2017
Calendar Year-To-Date Per Election for Office Sought 5685.90
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 2503.26
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , , [Electronically Filed] Date 11/30/2017
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee EBERLE COMMUNICATIONS GROUP
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL DATA CENTER
Date of Public Distribution/Dissemination 11 / 17 / 2017
Amount 139.73
Transaction ID : E0EC31FF8EC154684BBA
Date of Disbursement or Obligation 11 / 17 / 2017

Name of Federal Candidate: MOORE, ROY, , ,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 5825.63

Full Name of Payee
Mailing Address
City
State
Zip Code
Purpose of Expenditure
Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation

Name of Federal Candidate:
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 139.73; (b) SUBTOTAL of Unitemized Independent Expenditures; (c) TOTAL Independent Expenditures 67871.30

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , , [Electronically Filed]
Signature

Date 11 / 30 / 2017