

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

POLICE OFFICERS DEFENSE ALLIANCE LLC

ADDRESS (number and street) 4712 El Presidente Dr

Check if different than previously reported. (ACC)

LAS VEGAS NV 89129

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

C C00667865

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:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on M M M / D D D / Y Y Y Y Y Y in the State of

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

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
--	---------------------------------------	--

Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y 01 / 01 / 2020 through M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2020

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

Type or Print Name of Treasurer _____

Signature of Treasurer Pollock, Kecia, Marie, , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 04 / 14 / 2020

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

POLICE OFFICERS DEFENSE ALLIANCE LLC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		220908.43
(b) Cash on Hand at Beginning of Reporting Period.....	220908.43	
(c) Total Receipts (from Line 19)	763226.64	763226.64
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	984135.07	984135.07
7. Total Disbursements (from Line 31).....	784040.70	784040.70
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	200094.37	200094.37
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

POLICE OFFICERS DEFENSE ALLIANCE LLC

Report Covering the Period: From: 01 / 01 / 2020 To: 03 / 31 / 2020

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).....	4870.00	4870.00
(ii) Unitemized	758356.64	758356.64
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	763226.64	763226.64
(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)	763226.64	763226.64
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	763226.64	763226.64
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	763226.64	763226.64

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	779970.70	779970.70
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	779970.70	779970.70
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	4070.00	4070.00
(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)).....	4070.00	4070.00
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)) ..	784040.70	784040.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	784040.70	784040.70

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	763226.64	763226.64
34. Total Contribution Refunds (from Line 28(d))	4070.00	4070.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	759156.64	759156.64
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	779970.70	779970.70
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	779970.70	779970.70

: 97 `A-G79 @C B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHZG7 <98I @ `CF`-H9A-N5 H-CB

Form/Schedule: F3XN
Transaction ID :

BEST EFFORTS PRACTICES - C00667865 1. Initial solicitation for a contribution is made via phone call and solicitor additionally states during the solicitation call that as a part of compliance, the PAC is required to inform the contributor that "Federal law requires us to use our best efforts to collect and report the name, mailing address, occupation and name of employer of individuals whose contributions exceed \$200 in a calendar year". Following acceptance to provide a contribution, a follow-up invoice letter is mailed to the contributor which includes a clear and conspicuous request for contributor's employer and occupation information to be written in and returned when they mail back their contribution. 2. Secondly, if employer/occupation information was still not provided within the above steps, a follow up letter is sent via US mail along with a separate pre-addressed return envelope sent to the contributor, again clearly requesting the name of employer and occupation, without solicitation of a contribution to send back. 3. Lastly, the third/final step if employer/occupation information was still not provided, a follow up phone call is placed to the contributor within 30 days of receipt of the contribution during which the missing information is clearly requested (without solicitation of a contribution) as an FEC compliance requirement. If all of these steps have been exhausted and the employer and occupation information still has not been obtained from the donor, 'best efforts' will be entered into these fields to communicate to the FEC that all above steps were taken. If we are able to obtain missing employer/occupation information, we will amend our report to include the updated information.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 56
	<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	

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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. DEVORKEN, BARBARA N, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 GREEN ST
 APT 6
 City BROOKLINE State MA Zip Code 02446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Occupation (for Individual) Best Efforts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 01 / 06 / 2020
Transaction ID : SA11AI-18532709
 Amount of Each Receipt this Period 265.00
 Memo Item

B. FERGUSON, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 275 DATE PALM RD
 APT 701
 City VERO BEACH State FL Zip Code 32963
 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 02 / 03 / 2020
Transaction ID : SA11AI-18517327
 Amount of Each Receipt this Period 400.00
 Memo Item

C. FREEMAN, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 CHURCH ST
 City BOSTON State MA Zip Code 02116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Occupation (for Individual) Best Efforts
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 16 / 2020
Transaction ID : SA11AI-18528593
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	915.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 56
	<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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. GLICK, BONITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 610 BOLT RD
 City LAKE LURE State NC Zip Code 28746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Occupation (for Individual) Best Efforts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **02 / 10 / 2020**
Transaction ID : SA11AI-18530449
 Amount of Each Receipt this Period 400.00
 Memo Item

B. HELLEM, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1303 22ND AVE S
 City MOORHEAD State MN Zip Code 56560
 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 **01 / 16 / 2020**
Transaction ID : SA11AI-18528713
 Amount of Each Receipt this Period 210.00
 Memo Item

C. KABANDE, TERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2888 TORREY PINES RD
 City LA JOLLA State CA Zip Code 92037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Occupation (for Individual) Best Efforts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt **03 / 02 / 2020**
Transaction ID : SA11AI-18531651
 Amount of Each Receipt this Period 515.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1125.00
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 9 OF 56
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. LOPEZ, MIGUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2617 1ST AVE E
 STE 5N6
 City NEWTON State IA Zip Code 50208
 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
 02 / 20 / 2020
Transaction ID : SA11AI-18526985
 Amount of Each Receipt this Period
 300.00
 Memo Item

B. MCGINLEY, PAIGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1825 WOOD VALLEY DR
 City CARMEL State IN Zip Code 46032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Occupation (for Individual) Best Efforts
 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
 01 / 06 / 2020
Transaction ID : SA11AI-18518381
 Amount of Each Receipt this Period
 350.00
 Memo Item

C. NORTON, DANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 322 N 60TH AVE W
 City DULUTH State MN Zip Code 55807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Covenant Enabling Residences of MN Occupation (for Individual) ADULT FOSTER CARE
 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
 01 / 27 / 2020
Transaction ID : SA11AI-18517742
 Amount of Each Receipt this Period
 250.00
 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: PAGE 10 OF 56
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. OGAREVA, OLGA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 952 CASTLEWOOD DR
 APT 1
 City LOS GATOS State CA Zip Code 95032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Occupation (for Individual) Best Efforts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 03 / 2020
Transaction ID : SA11AI-18517128
 Amount of Each Receipt this Period 250.00
 Memo Item

B. PUGLIESE, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1053 AVE
 APT 358
 City WESTFIELD State NJ Zip Code 07090
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Occupation (for Individual) Best Efforts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 26 / 2020
Transaction ID : SA11AI-18523525
 Amount of Each Receipt this Period 250.00
 Memo Item

C. RISTEMI, IZAI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1776 CHURN CREEK RD
 City REDDING State CA Zip Code 96002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Occupation (for Individual) Best Efforts
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt 02 / 26 / 2020
Transaction ID : SA11AI-18523347
 Amount of Each Receipt this Period 365.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 865.00
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 11 OF 56
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. SISLER, KERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 256 SHAWNEE CT
 City O FALLON State IL Zip Code 62269
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Best Efforts Occupation (for Individual) Best Efforts
 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
 02 / 10 / 2020
Transaction ID : SA11AI-18515506
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. SLIWINSKI, MARTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 203 BREMOND ST
 City BELLEVILLE State NJ Zip Code 07109
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Best Efforts Occupation (for Individual) Best Efforts
 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
 01 / 13 / 2020
Transaction ID : SA11AI-18520592
 Amount of Each Receipt this Period
 300.00
 Memo Item

C. WIENKEN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2125 ARBOR CT
 City MECHANICSBURG State PA Zip Code 17055
 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
 01 / 27 / 2020
Transaction ID : SA11AI-18517641
 Amount of Each Receipt this Period
 250.00
 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: PAGE 12 OF 56
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WOLF, MARGOT, , ,

Mailing Address **2 FERRY LN**

City **BARRINGTON** State **RI** Zip Code **02806**

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

Name of Employer (for Individual) **Best Efforts** Occupation (for Individual) **Best Efforts**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **265.00**

Date of Receipt
01 / 02 / 2020

Transaction ID : SA11AI-18533688

Amount of Each Receipt this Period
265.00

Memo Item

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

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	265.00
TOTAL This Period (last page this line number only).....▶	4870.00

**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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. Pollock, Kecia M., , ,		Date of Disbursement MM / DD / YYYY 01 / 02 / 2020	
Mailing Address 4712 El Presidente Dr		FEC Identification Number C [REDACTED] Transaction ID : SB21B-33713 Amount of Each Disbursement this Period 1677.00	
City Las Vegas	State NV	Zip Code 89129	Category/ Type 001
Purpose of Disbursement Payroll			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Pollock, Kecia M., , ,		Date of Disbursement MM / DD / YYYY 01 / 10 / 2020	
Mailing Address 4712 El Presidente Dr		FEC Identification Number C [REDACTED] Transaction ID : SB21B-33712 Amount of Each Disbursement this Period 540.10	
City Las Vegas	State NV	Zip Code 89129	Category/ Type 001
Purpose of Disbursement Payroll			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Pollock, Kecia M., , ,		Date of Disbursement MM / DD / YYYY 01 / 16 / 2020	
Mailing Address 4712 El Presidente Dr		FEC Identification Number C [REDACTED] Transaction ID : SB21B-33711 Amount of Each Disbursement this Period 2078.75	
City Las Vegas	State NV	Zip Code 89129	Category/ Type 001
Purpose of Disbursement Payroll			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	4295.85
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. Pollock, Kecia M., , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4712 El Presidente Dr

City Las Vegas State NV Zip Code 89129

Purpose of Disbursement Payroll 001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement 01 / 30 / 2020

FEC Identification Number C

Transaction ID : SB21B-33714

Amount of Each Disbursement this Period 2480.50

Memo Item

B. Pollock, Kecia M., , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4712 El Presidente Dr

City Las Vegas State NV Zip Code 89129

Purpose of Disbursement Payroll 001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement 02 / 13 / 2020

FEC Identification Number C

Transaction ID : SB21B-33714

Amount of Each Disbursement this Period 2480.50

Memo Item

C. Pollock, Kecia M., , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4712 El Presidente Dr

City Las Vegas State NV Zip Code 89129

Purpose of Disbursement Payroll 001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement 02 / 27 / 2020

FEC Identification Number C

Transaction ID : SB21B-33714

Amount of Each Disbursement this Period 2480.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7441.50

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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. Pollock, Kecia M., , ,			Date of Disbursement MM / DD / YYYY 03 / 12 / 2020	
Mailing Address 4712 El Presidente Dr				
City Las Vegas	State NV	Zip Code 89129	FEC Identification Number C [REDACTED] Transaction ID : SB21B-33714 Amount of Each Disbursement this Period 3942.50	
Purpose of Disbursement Payroll		Category/Type 001		
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Pollock, Kecia M., , ,			Date of Disbursement MM / DD / YYYY 03 / 26 / 2020	
Mailing Address 4712 El Presidente Dr				
City Las Vegas	State NV	Zip Code 89129	FEC Identification Number C [REDACTED] Transaction ID : SB21B-33714 Amount of Each Disbursement this Period 2480.50	
Purpose of Disbursement Payroll		Category/Type 001		
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. American Technology Services			Date of Disbursement MM / DD / YYYY 01 / 02 / 2020	
Mailing Address 125 North 2nd Street Box 241				
City Phoenix	State AZ	Zip Code 85004	FEC Identification Number C [REDACTED] Transaction ID : SB21B-33714 Amount of Each Disbursement this Period 19392.00	
Purpose of Disbursement Software Licensing		Category/Type 001		
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	25815.00
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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. American Technology Services		Date of Disbursement MM / DD / YYYY 01 / 10 / 2020
Mailing Address 125 North 2nd Street Box 241		FEC Identification Number C [REDACTED] Transaction ID : SB21B-33717 Amount of Each Disbursement this Period [REDACTED] 22323.68
City Phoenix	State AZ	Zip Code 85004
Purpose of Disbursement Software Licensing		001 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. American Technology Services		Date of Disbursement MM / DD / YYYY 01 / 16 / 2020
Mailing Address 125 North 2nd Street Box 241		FEC Identification Number C [REDACTED] Transaction ID : SB21B-33717 Amount of Each Disbursement this Period [REDACTED] 24205.44
City Phoenix	State AZ	Zip Code 85004
Purpose of Disbursement Software Licensing		001 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. American Technology Services		Date of Disbursement MM / DD / YYYY 01 / 22 / 2020
Mailing Address 125 North 2nd Street Box 241		FEC Identification Number C [REDACTED] Transaction ID : SB21B-33717 Amount of Each Disbursement this Period [REDACTED] 22620.48
City Phoenix	State AZ	Zip Code 85004
Purpose of Disbursement Software Licensing		001 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 69149.60
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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. American Technology Services

Full Name (Last, First, Middle Initial)

Mailing Address 125 North 2nd Street
Box 241

City Phoenix State AZ Zip Code 85004

Purpose of Disbursement Software Licensing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 30 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33716

Amount of Each Disbursement this Period: 18390.08

Memo Item

B. American Technology Services

Full Name (Last, First, Middle Initial)

Mailing Address 125 North 2nd Street
Box 241

City Phoenix State AZ Zip Code 85004

Purpose of Disbursement Software Licensing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 07 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33716

Amount of Each Disbursement this Period: 13000.00

Memo Item

C. American Technology Services

Full Name (Last, First, Middle Initial)

Mailing Address 125 North 2nd Street
Box 241

City Phoenix State AZ Zip Code 85004

Purpose of Disbursement Software Licensing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 10 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33716

Amount of Each Disbursement this Period: 1745.92

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 33136.00

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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. American Technology Services			Date of Disbursement MM / DD / YYYY 02 / 12 / 2020	
Mailing Address 125 North 2nd Street Box 241			FEC Identification Number C [REDACTED] Transaction ID : SB21B-33716 Amount of Each Disbursement this Period 17715.20	
City Phoenix	State AZ	Zip Code 85004	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Software Licensing		Category/ Type 001		
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:				

Full Name (Last, First, Middle Initial) B. American Technology Services			Date of Disbursement MM / DD / YYYY 02 / 24 / 2020	
Mailing Address 125 North 2nd Street Box 241			FEC Identification Number C [REDACTED] Transaction ID : SB21B-33716 Amount of Each Disbursement this Period 15156.64	
City Phoenix	State AZ	Zip Code 85004	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Software Licensing		Category/ Type 001		
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:				

Full Name (Last, First, Middle Initial) C. American Technology Services			Date of Disbursement MM / DD / YYYY 02 / 27 / 2020	
Mailing Address 125 North 2nd Street Box 241			FEC Identification Number C [REDACTED] Transaction ID : SB21B-33716 Amount of Each Disbursement this Period 18683.04	
City Phoenix	State AZ	Zip Code 85004	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Software Licensing		Category/ Type 001		
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:				

SUBTOTAL of Disbursements This Page (optional).....▶	51554.88
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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. American Technology Services		Date of Disbursement MM / DD / YYYY 03 / 04 / 2020
Mailing Address 125 North 2nd Street Box 241		FEC Identification Number C [REDACTED] Transaction ID : SB21B-33717 Amount of Each Disbursement this Period [REDACTED] 20428.16
City Phoenix	State AZ	Zip Code 85004
Purpose of Disbursement Software Licensing		001 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. American Technology Services		Date of Disbursement MM / DD / YYYY 03 / 11 / 2020
Mailing Address 125 North 2nd Street Box 241		FEC Identification Number C [REDACTED] Transaction ID : SB21B-33717 Amount of Each Disbursement this Period [REDACTED] 21144.48
City Phoenix	State AZ	Zip Code 85004
Purpose of Disbursement Software Licensing		001 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. American Technology Services		Date of Disbursement MM / DD / YYYY 03 / 19 / 2020
Mailing Address 125 North 2nd Street Box 241		FEC Identification Number C [REDACTED] Transaction ID : SB21B-33717 Amount of Each Disbursement this Period [REDACTED] 20942.88
City Phoenix	State AZ	Zip Code 85004
Purpose of Disbursement Software Licensing		001 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).....▶	[REDACTED] 62515.52
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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. American Technology Services

Full Name (Last, First, Middle Initial)

Mailing Address 125 North 2nd Street
Box 241

City Phoenix State AZ Zip Code 85004

Purpose of Disbursement Software Licensing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
03 / 26 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33715

Amount of Each Disbursement this Period: 10424.16

Memo Item

B. Authorize.net

Full Name (Last, First, Middle Initial)

Mailing Address 808 E Utah Valley Dr

City American Fork State UT Zip Code 84003

Purpose of Disbursement Merchant Service Bankcard Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
01 / 02 / 2020

FEC Identification Number: C

Transaction ID : SB21B-34156

Amount of Each Disbursement this Period: 80.04

Memo Item

C. Authorize.net

Full Name (Last, First, Middle Initial)

Mailing Address 808 E Utah Valley Dr

City American Fork State UT Zip Code 84003

Purpose of Disbursement Merchant Service Bankcard Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
01 / 02 / 2020

FEC Identification Number: C

Transaction ID : SB21B-34156

Amount of Each Disbursement this Period: 80.04

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 10584.24

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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. Authorize.net

Full Name (Last, First, Middle Initial)

Mailing Address 808 E Utah Valley Dr

City American Fork State UT Zip Code 84003

Purpose of Disbursement Merchant Service Bankcard Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 01 / 02 / 2020

FEC Identification Number C

Transaction ID : SB21B-33714

Amount of Each Disbursement this Period 2329.66

Memo Item

B. Authorize.net

Full Name (Last, First, Middle Initial)

Mailing Address 808 E Utah Valley Dr

City American Fork State UT Zip Code 84003

Purpose of Disbursement Credit Card Processing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 01 / 03 / 2020

FEC Identification Number C

Transaction ID : SB21B-33712

Amount of Each Disbursement this Period 376.76

Memo Item

C. Authorize.net

Full Name (Last, First, Middle Initial)

Mailing Address 808 E Utah Valley Dr

City American Fork State UT Zip Code 84003

Purpose of Disbursement Merchant Service Bankcard Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 01 / 06 / 2020

FEC Identification Number C

Transaction ID : SB21B-3415!

Amount of Each Disbursement this Period 20.02

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2726.44

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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. Authorize.net			Date of Disbursement MM / DD / YYYY 01 / 07 / 2020		
Mailing Address 808 E Utah Valley Dr					
City American Fork		State UT	Zip Code 84003		
Purpose of Disbursement Merchant Service Bankcard Fees				Category/Type 001	
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			

FEC Identification Number
C
Transaction ID : SB21B-34155
Amount of Each Disbursement this Period
35.02

Full Name (Last, First, Middle Initial) B. Authorize.net			Date of Disbursement MM / DD / YYYY 01 / 09 / 2020		
Mailing Address 808 E Utah Valley Dr					
City American Fork		State UT	Zip Code 84003		
Purpose of Disbursement Merchant Service Bankcard Fees				Category/Type 001	
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			

FEC Identification Number
C
Transaction ID : SB21B-33709
Amount of Each Disbursement this Period
40.02

Full Name (Last, First, Middle Initial) C. Authorize.net			Date of Disbursement MM / DD / YYYY 01 / 10 / 2020		
Mailing Address 808 E Utah Valley Dr					
City American Fork		State UT	Zip Code 84003		
Purpose of Disbursement Merchant Service Bankcard Fees				Category/Type 001	
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			

FEC Identification Number
C
Transaction ID : SB21B-33709
Amount of Each Disbursement this Period
50.04

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

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

125.08

**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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. Authorize.net

Full Name (Last, First, Middle Initial)

Mailing Address 808 E Utah Valley Dr

City American Fork State UT Zip Code 84003

Purpose of Disbursement Merchant Service Bankcard Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 01 / 13 / 2020

FEC Identification Number C

Transaction ID : SB21B-33709

Amount of Each Disbursement this Period 30.55

Memo Item

B. Authorize.net

Full Name (Last, First, Middle Initial)

Mailing Address 808 E Utah Valley Dr

City American Fork State UT Zip Code 84003

Purpose of Disbursement Merchant Service Bankcard Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 01 / 17 / 2020

FEC Identification Number C

Transaction ID : SB21B-33709

Amount of Each Disbursement this Period 30.02

Memo Item

C. Authorize.net

Full Name (Last, First, Middle Initial)

Mailing Address 808 E Utah Valley Dr

City American Fork State UT Zip Code 84003

Purpose of Disbursement Merchant Service Bankcard Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 01 / 21 / 2020

FEC Identification Number C

Transaction ID : SB21B-33709

Amount of Each Disbursement this Period 0.06

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 60.63

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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address 808 E Utah Valley Dr

City American Fork State UT Zip Code 84003

Purpose of Disbursement
Merchant Service Bankcard Fees

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 22 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-34156

Amount of Each Disbursement this Period

[REDACTED] 55.04

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address 808 E Utah Valley Dr

City American Fork State UT Zip Code 84003

Purpose of Disbursement
Merchant Service Bankcard Fees

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 24 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-33711

Amount of Each Disbursement this Period

[REDACTED] 155.09

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address 808 E Utah Valley Dr

City American Fork State UT Zip Code 84003

Purpose of Disbursement
Merchant Service Bankcard Fees

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 29 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-33708

Amount of Each Disbursement this Period

[REDACTED] 15.43

Memo Item

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

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

[REDACTED] 225.56

[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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. Authorize.net		Date of Disbursement MM / DD / YYYY 01 / 30 / 2020	
Mailing Address 808 E Utah Valley Dr			
City American Fork	State UT	Zip Code 84003	
Purpose of Disbursement Merchant Service Bankcard Fees		<input type="text" value="001"/>	FEC Identification Number <input type="text" value="C"/>
Candidate Name		Category/Type	Transaction ID : SB21B-33710
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) ▼		Amount of Each Disbursement this Period <input type="text" value="90.05"/>
State: District:			<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Authorize.net		Date of Disbursement MM / DD / YYYY 01 / 31 / 2020	
Mailing Address 808 E Utah Valley Dr			
City American Fork	State UT	Zip Code 84003	
Purpose of Disbursement Merchant Service Bankcard Fees		<input type="text" value="001"/>	FEC Identification Number <input type="text" value="C"/>
Candidate Name		Category/Type	Transaction ID : SB21B-33711
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) ▼		Amount of Each Disbursement this Period <input type="text" value="160.09"/>
State: District:			<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Authorize.net		Date of Disbursement MM / DD / YYYY 01 / 31 / 2020	
Mailing Address 808 E Utah Valley Dr			
City American Fork	State UT	Zip Code 84003	
Purpose of Disbursement Merchant Service Bankcard Fees		<input type="text" value="001"/>	FEC Identification Number <input type="text" value="C"/>
Candidate Name		Category/Type	Transaction ID : SB21B-33714
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) ▼		Amount of Each Disbursement this Period <input type="text" value="2699.00"/>
State: District:			<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	<input type="text" value="2949.14"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial)
A. Authorize.net

Mailing Address 808 E Utah Valley Dr

City American Fork State UT Zip Code 84003

Purpose of Disbursement Merchant Service Bankcard Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 03 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33709

Amount of Each Disbursement this Period: 20.02

Memo Item

Full Name (Last, First, Middle Initial)
B. Authorize.net

Mailing Address 808 E Utah Valley Dr

City American Fork State UT Zip Code 84003

Purpose of Disbursement Merchant Service Bankcard Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 03 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33714

Amount of Each Disbursement this Period: 2621.43

Memo Item

Full Name (Last, First, Middle Initial)
C. Authorize.net

Mailing Address 808 E Utah Valley Dr

City American Fork State UT Zip Code 84003

Purpose of Disbursement Credit Card Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 04 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33711

Amount of Each Disbursement this Period: 373.47

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3014.92

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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. Authorize.net			Date of Disbursement MM / DD / YYYY 02 / 05 / 2020		
Mailing Address 808 E Utah Valley Dr			FEC Identification Number C [] Transaction ID : SB21B-33711 Amount of Each Disbursement this Period [] 285.14		
City American Fork	State UT	Zip Code 84003	Category/Type 001		
Purpose of Disbursement Merchant Service Bankcard Fees		Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					
Full Name (Last, First, Middle Initial) B. Authorize.net			Date of Disbursement MM / DD / YYYY 02 / 06 / 2020		
Mailing Address 808 E Utah Valley Dr			FEC Identification Number C [] Transaction ID : SB21B-34155 Amount of Each Disbursement this Period [] 50.02		
City American Fork	State UT	Zip Code 84003	Category/Type 001		
Purpose of Disbursement Merchant Service Bankcard Fees		Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					
Full Name (Last, First, Middle Initial) C. Authorize.net			Date of Disbursement MM / DD / YYYY 02 / 07 / 2020		
Mailing Address 808 E Utah Valley Dr			FEC Identification Number C [] Transaction ID : SB21B-33711 Amount of Each Disbursement this Period [] 215.09		
City American Fork	State UT	Zip Code 84003	Category/Type 001		
Purpose of Disbursement Merchant Service Bankcard Fees		Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					
SUBTOTAL of Disbursements This Page (optional)..... ▶			[] 550.25		
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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. Authorize.net

Full Name (Last, First, Middle Initial)

Mailing Address 808 E Utah Valley Dr

City American Fork State UT Zip Code 84003

Purpose of Disbursement Merchant Service Bankcard Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 10 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33711

Amount of Each Disbursement this Period: 155.06

Memo Item

B. Authorize.net

Full Name (Last, First, Middle Initial)

Mailing Address 808 E Utah Valley Dr

City American Fork State UT Zip Code 84003

Purpose of Disbursement Merchant Service Bankcard Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 12 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33710

Amount of Each Disbursement this Period: 85.04

Memo Item

C. Authorize.net

Full Name (Last, First, Middle Initial)

Mailing Address 808 E Utah Valley Dr

City American Fork State UT Zip Code 84003

Purpose of Disbursement Merchant Service Bankcard Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 19 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33705

Amount of Each Disbursement this Period: 20.02

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 260.12

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input 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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. Authorize.net

Full Name (Last, First, Middle Initial)

Mailing Address 808 E Utah Valley Dr

City American Fork State UT Zip Code 84003

Purpose of Disbursement Merchant Service Bankcard Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33711

Amount of Each Disbursement this Period: 200.02

Memo Item

B. Authorize.net

Full Name (Last, First, Middle Initial)

Mailing Address 808 E Utah Valley Dr

City American Fork State UT Zip Code 84003

Purpose of Disbursement Merchant Service Bankcard Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 25 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33710

Amount of Each Disbursement this Period: 100.02

Memo Item

C. Authorize.net

Full Name (Last, First, Middle Initial)

Mailing Address 808 E Utah Valley Dr

City American Fork State UT Zip Code 84003

Purpose of Disbursement Merchant Service Bankcard Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 26 / 2020

FEC Identification Number: C

Transaction ID : SB21B-3415!

Amount of Each Disbursement this Period: 20.02

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 320.06

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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. Authorize.net

Full Name (Last, First, Middle Initial)

Mailing Address 808 E Utah Valley Dr

City American Fork State UT Zip Code 84003

Purpose of Disbursement Merchant Service Bankcard Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 02 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33713

Amount of Each Disbursement this Period: 2200.71

Memo Item

B. Authorize.net

Full Name (Last, First, Middle Initial)

Mailing Address 808 E Utah Valley Dr

City American Fork State UT Zip Code 84003

Purpose of Disbursement Credit Card Processing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 03 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33711

Amount of Each Disbursement this Period: 357.44

Memo Item

C. Authorize.net

Full Name (Last, First, Middle Initial)

Mailing Address 808 E Utah Valley Dr

City American Fork State UT Zip Code 84003

Purpose of Disbursement Merchant Service Bankcard Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 09 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33711

Amount of Each Disbursement this Period: 115.06

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2673.21

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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. Authorize.net

Full Name (Last, First, Middle Initial)

Mailing Address 808 E Utah Valley Dr

City American Fork State UT Zip Code 84003

Purpose of Disbursement Merchant Service Bankcard Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 11 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33709

Amount of Each Disbursement this Period: 35.02

Memo Item

B. Authorize.net

Full Name (Last, First, Middle Initial)

Mailing Address 808 E Utah Valley Dr

City American Fork State UT Zip Code 84003

Purpose of Disbursement Merchant Service Bankcard Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 12 / 2020

FEC Identification Number: C

Transaction ID : SB21B-34155

Amount of Each Disbursement this Period: 35.02

Memo Item

C. Authorize.net

Full Name (Last, First, Middle Initial)

Mailing Address 808 E Utah Valley Dr

City American Fork State UT Zip Code 84003

Purpose of Disbursement Merchant Service Bankcard Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 16 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33711

Amount of Each Disbursement this Period: 100.07

Memo Item

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

170.11

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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. Authorize.net		Date of Disbursement MM / DD / YYYY 03 / 31 / 2020	
Mailing Address 808 E Utah Valley Dr		FEC Identification Number C [REDACTED] Transaction ID : SB21B-33695 Amount of Each Disbursement this Period 9233.93	
City American Fork	State UT	Zip Code 84003	Category/ Type 001
Purpose of Disbursement Credit Card Processing Fees combined		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. Compliance Consultants		Date of Disbursement MM / DD / YYYY 01 / 02 / 2020	
Mailing Address 270 Cobb Pky S		FEC Identification Number C [REDACTED] Transaction ID : SB21B-33718 Amount of Each Disbursement this Period 27524.29	
City Marietta	State GA	Zip Code 30060	Category/ Type 001
Purpose of Disbursement Credit Card Pmt Processing and		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. Compliance Consultants		Date of Disbursement MM / DD / YYYY 01 / 10 / 2020	
Mailing Address 270 Cobb Pky S		FEC Identification Number C [REDACTED] Transaction ID : SB21B-33718 Amount of Each Disbursement this Period 31685.22	
City Marietta	State GA	Zip Code 30060	Category/ Type 001
Purpose of Disbursement Credit Card Pmt Processing and		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).....▶	68443.44
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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. Compliance Consultants

Full Name (Last, First, Middle Initial)

Mailing Address 270 Cobb Pky S

City Marietta State GA Zip Code 30060

Purpose of Disbursement Credit Card Pmt Processing and

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 16 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33718

Amount of Each Disbursement this Period: 34356.14

Memo Item

B. Compliance Consultants

Full Name (Last, First, Middle Initial)

Mailing Address 270 Cobb Pky S

City Marietta State GA Zip Code 30060

Purpose of Disbursement Credit Card Pmt Processing and

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 22 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33718

Amount of Each Disbursement this Period: 32106.49

Memo Item

C. Compliance Consultants

Full Name (Last, First, Middle Initial)

Mailing Address 270 Cobb Pky S

City Marietta State GA Zip Code 30060

Purpose of Disbursement Credit Card Pmt Processing and

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 30 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33718

Amount of Each Disbursement this Period: 26102.19

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 92564.82

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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. Compliance Consultants

Full Name (Last, First, Middle Initial)

Mailing Address 270 Cobb Pky S

City Marietta State GA Zip Code 30060

Purpose of Disbursement Credit Card Pmt Processing and

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 10 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33716

Amount of Each Disbursement this Period: 10464.88

Memo Item

B. Compliance Consultants

Full Name (Last, First, Middle Initial)

Mailing Address 270 Cobb Pky S

City Marietta State GA Zip Code 30060

Purpose of Disbursement Accounting Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 11 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33716

Amount of Each Disbursement this Period: 10464.88

Memo Item

C. Compliance Consultants

Full Name (Last, First, Middle Initial)

Mailing Address 270 Cobb Pky S

City Marietta State GA Zip Code 30060

Purpose of Disbursement Credit Card Pmt Processing and

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 12 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33717

Amount of Each Disbursement this Period: 25144.25

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 46074.01

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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. Compliance Consultants			Date of Disbursement MM / DD / YYYY 02 / 24 / 2020	
Mailing Address 270 Cobb Pky S			FEC Identification Number C [REDACTED] Transaction ID : SB21B-33717 Amount of Each Disbursement this Period [REDACTED] 21512.50	
City Marietta	State GA	Zip Code 30060	Category/Type 001	
Purpose of Disbursement Credit Card Pmt Processing and			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. Compliance Consultants			Date of Disbursement MM / DD / YYYY 02 / 27 / 2020	
Mailing Address 270 Cobb Pky S			FEC Identification Number C [REDACTED] Transaction ID : SB21B-33718 Amount of Each Disbursement this Period [REDACTED] 26518.01	
City Marietta	State GA	Zip Code 30060	Category/Type 001	
Purpose of Disbursement Credit Card Pmt Processing and			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. Compliance Consultants			Date of Disbursement MM / DD / YYYY 03 / 04 / 2020	
Mailing Address 270 Cobb Pky S			FEC Identification Number C [REDACTED] Transaction ID : SB21B-33718 Amount of Each Disbursement this Period [REDACTED] 28994.99	
City Marietta	State GA	Zip Code 30060	Category/Type 001	
Purpose of Disbursement Credit Card Pmt Processing and			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] 77025.50	
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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. Compliance Consultants

Full Name (Last, First, Middle Initial)

Mailing Address 270 Cobb Pky S

City Marietta State GA Zip Code 30060

Purpose of Disbursement Credit Card Pmt Processing and

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 11 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33718

Amount of Each Disbursement this Period: 30011.49

Memo Item

B. Compliance Consultants

Full Name (Last, First, Middle Initial)

Mailing Address 270 Cobb Pky S

City Marietta State GA Zip Code 30060

Purpose of Disbursement Credit Card Pmt Processing and

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 19 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33718

Amount of Each Disbursement this Period: 29725.35

Memo Item

C. Compliance Consultants

Full Name (Last, First, Middle Initial)

Mailing Address 270 Cobb Pky S

City Marietta State GA Zip Code 30060

Purpose of Disbursement Credit Card Pmt Processing and

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 26 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33718

Amount of Each Disbursement this Period: 14795.57

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 74532.41

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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. North Star Multimedia

Full Name (Last, First, Middle Initial)

Mailing Address 9360 W. Flamingo #110-226

City Las Vegas State NV Zip Code 89147

Purpose of Disbursement Website Hosting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 13 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33712

Amount of Each Disbursement this Period: 1000.00

Memo Item

B. North Star Multimedia

Full Name (Last, First, Middle Initial)

Mailing Address 9360 W. Flamingo #110-226

City Las Vegas State NV Zip Code 89147

Purpose of Disbursement Website Hosting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 27 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33713

Amount of Each Disbursement this Period: 1500.00

Memo Item

C. North Star Multimedia

Full Name (Last, First, Middle Initial)

Mailing Address 9360 W. Flamingo #110-226

City Las Vegas State NV Zip Code 89147

Purpose of Disbursement Website Hosting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 17 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33711

Amount of Each Disbursement this Period: 1550.00

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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. Unified Data Services

Full Name (Last, First, Middle Initial)

Mailing Address 2223 S Highland Dr #E6-240

City Salt Lake City State UT Zip Code 84106

Purpose of Disbursement Caging and Escrow

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 01 / 10 / 2020

FEC Identification Number C

Transaction ID : SB21B-33716

Amount of Each Disbursement this Period 10799.10

Memo Item

B. Unified Data Services

Full Name (Last, First, Middle Initial)

Mailing Address 2223 S Highland Dr #E6-240

City Salt Lake City State UT Zip Code 84106

Purpose of Disbursement Caging and Escrow

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 01 / 16 / 2020

FEC Identification Number C

Transaction ID : SB21B-33716

Amount of Each Disbursement this Period 11711.70

Memo Item

C. Unified Data Services

Full Name (Last, First, Middle Initial)

Mailing Address 2223 S Highland Dr #E6-240

City Salt Lake City State UT Zip Code 84106

Purpose of Disbursement Caging and Escrow

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 01 / 22 / 2020

FEC Identification Number C

Transaction ID : SB21B-33716

Amount of Each Disbursement this Period 10943.40

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 33454.20

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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. Unified Data Services		Date of Disbursement MM / DD / YYYY 01 / 30 / 2020
Mailing Address 2223 S Highland Dr #E6-240		FEC Identification Number C [REDACTED] Transaction ID : SB21B-33715 Amount of Each Disbursement this Period 8895.90
City Salt Lake City	State UT	Zip Code 84106
Purpose of Disbursement Caging and Escrow		Category/ Type 003
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Unified Data Services		Date of Disbursement MM / DD / YYYY 02 / 06 / 2020
Mailing Address 2223 S Highland Dr #E6-240		FEC Identification Number C [REDACTED] Transaction ID : SB21B-33714 Amount of Each Disbursement this Period 7133.10
City Salt Lake City	State UT	Zip Code 84106
Purpose of Disbursement Caging and Escrow		Category/ Type 003
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Unified Data Services		Date of Disbursement MM / DD / YYYY 02 / 12 / 2020
Mailing Address 2223 S Highland Dr #E6-240		FEC Identification Number C [REDACTED] Transaction ID : SB21B-33714 Amount of Each Disbursement this Period 8572.20
City Salt Lake City	State UT	Zip Code 84106
Purpose of Disbursement Caging and Escrow		Category/ Type 003
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	24601.20
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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. Unified Data Services		Date of Disbursement MM / DD / YYYY 02 / 24 / 2020
Mailing Address 2223 S Highland Dr #E6-240		FEC Identification Number C [REDACTED] Transaction ID : SB21B-33715 Amount of Each Disbursement this Period 7332.00
City Salt Lake City	State UT	Zip Code 84106
Purpose of Disbursement Caging and Escrow		Category/ Type 003
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Unified Data Services		Date of Disbursement MM / DD / YYYY 02 / 27 / 2020
Mailing Address 2223 S Highland Dr #E6-240		FEC Identification Number C [REDACTED] Transaction ID : SB21B-33715 Amount of Each Disbursement this Period 9040.20
City Salt Lake City	State UT	Zip Code 84106
Purpose of Disbursement Caging and Escrow		Category/ Type 003
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Unified Data Services		Date of Disbursement MM / DD / YYYY 03 / 04 / 2020
Mailing Address 2223 S Highland Dr #E6-240		FEC Identification Number C [REDACTED] Transaction ID : SB21B-33715 Amount of Each Disbursement this Period 9882.60
City Salt Lake City	State UT	Zip Code 84106
Purpose of Disbursement Caging and Escrow		Category/ Type 003
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

26254.80

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial)

A. Unified Data Services

Mailing Address 2223 S Highland Dr
#E6-240

City Salt Lake City State UT Zip Code 84106

Purpose of Disbursement
Caging and Escrow

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-33715
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Data Services

Mailing Address 2223 S Highland Dr
#E6-240

City Salt Lake City State UT Zip Code 84106

Purpose of Disbursement
Caging and Escrow

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-33715
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Data Services

Mailing Address 2223 S Highland Dr
#E6-240

City Salt Lake City State UT Zip Code 84106

Purpose of Disbursement
Caging and Escrow

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-33715
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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial)
A. United States Department of the Treasury

Mailing Address 1500 Pennsylvania Ave., N.W.

City Washington State DC Zip Code 20220

Purpose of Disbursement Taxes 001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 01 / 08 / 2020

FEC Identification Number: C
Transaction ID : SB21B-33712
Amount of Each Disbursement this Period: 476.00

Memo Item

Full Name (Last, First, Middle Initial)
B. United States Department of the Treasury

Mailing Address 1500 Pennsylvania Ave., N.W.

City Washington State DC Zip Code 20220

Purpose of Disbursement Taxes 001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 01 / 13 / 2020

FEC Identification Number: C
Transaction ID : SB21B-33710
Amount of Each Disbursement this Period: 105.80

Memo Item

Full Name (Last, First, Middle Initial)
C. United States Department of the Treasury

Mailing Address 1500 Pennsylvania Ave., N.W.

City Washington State DC Zip Code 20220

Purpose of Disbursement Taxes 001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 01 / 22 / 2020

FEC Identification Number: C
Transaction ID : SB21B-33711
Amount of Each Disbursement this Period: 612.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1194.30

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial)
A. United States Department of the Treasury

Mailing Address 1500 Pennsylvania Ave., N.W.

City Washington State DC Zip Code 20220

Purpose of Disbursement Taxes 001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 01 / 30 / 2020

FEC Identification Number: C
Transaction ID : SB21B-33710
Amount of Each Disbursement this Period: 84.00

Memo Item

Full Name (Last, First, Middle Initial)
B. United States Department of the Treasury

Mailing Address 1500 Pennsylvania Ave., N.W.

City Washington State DC Zip Code 20220

Purpose of Disbursement Taxes 001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 02 / 05 / 2020

FEC Identification Number: C
Transaction ID : SB21B-33712
Amount of Each Disbursement this Period: 749.00

Memo Item

Full Name (Last, First, Middle Initial)
C. United States Department of the Treasury

Mailing Address 1500 Pennsylvania Ave., N.W.

City Washington State DC Zip Code 20220

Purpose of Disbursement Taxes 001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 02 / 19 / 2020

FEC Identification Number: C
Transaction ID : SB21B-33711
Amount of Each Disbursement this Period: 749.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1582.00

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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial)

A. United States Department of the Treasury

Mailing Address 1500 Pennsylvania Ave., N.W.

City Washington State DC Zip Code 20220

Purpose of Disbursement Taxes

001
Category/Type

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 04 / 2020

FEC Identification Number

C
Transaction ID : SB21B-33712
Amount of Each Disbursement this Period
749.00

Memo Item

Full Name (Last, First, Middle Initial)

B. United States Department of the Treasury

Mailing Address 1500 Pennsylvania Ave., N.W.

City Washington State DC Zip Code 20220

Purpose of Disbursement Taxes

001
Category/Type

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 18 / 2020

FEC Identification Number

C
Transaction ID : SB21B-33713
Amount of Each Disbursement this Period
1440.00

Memo Item

Full Name (Last, First, Middle Initial)

C. United States Postal Service

Mailing Address 4705 S Durango Dr #100

City Las Vegas State NV Zip Code 89147

Purpose of Disbursement Postage, Mailing Service

001
Category/Type

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

FEC Identification Number

C
Transaction ID : SB21B-33713
Amount of Each Disbursement this Period
380.00

Memo Item

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

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

2569.00

**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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial)

A. Wells Fargo Bank

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-33708
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Wells Fargo Bank

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Deposit Adjustment

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-33709
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Wells Fargo Bank

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-33711
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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial)

A. Wells Fargo Bank

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Deposit Adjustment

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-33709
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Wells Fargo Bank

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-33719
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Wells Fargo Bank

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Deposit Adjustment

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-33711
 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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial)

A. Wells Fargo Bank

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-33719
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Wells Fargo Bank

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-33720
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Wells Fargo Bank

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Return Deposit Fee

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-3415!
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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. Wells Fargo Bank

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 11 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33719

Amount of Each Disbursement this Period: 12.00

Memo Item

B. Wells Fargo Bank

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement Bank Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 14 / 2020

FEC Identification Number: C

Transaction ID : SB21B-34155

Amount of Each Disbursement this Period: 25.00

Memo Item

C. Wells Fargo Bank

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 14 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33721

Amount of Each Disbursement this Period: 48.00

Memo Item

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

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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial)

A. Wells Fargo Bank

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-33720
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Wells Fargo Bank

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-33719
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Wells Fargo Bank

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-33719
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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. Wells Fargo Bank

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 02 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33719

Amount of Each Disbursement this Period: 12.00

Memo Item

B. Wells Fargo Bank

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement Bank Deposit Adjustment

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 03 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33710

Amount of Each Disbursement this Period: 80.06

Memo Item

C. Wells Fargo Bank

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement Bank Deposit Adjustment

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 04 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33711

Amount of Each Disbursement this Period: 250.15

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 342.21

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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. Wells Fargo Bank

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 06 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33720

Amount of Each Disbursement this Period: 12.00

Memo Item

B. Wells Fargo Bank

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement Bank Deposit Adjustment

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 06 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33711

Amount of Each Disbursement this Period: 125.07

Memo Item

C. Wells Fargo Bank

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 12 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33721

Amount of Each Disbursement this Period: 12.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 149.07

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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial)

A. Wells Fargo Bank

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-33720
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Wells Fargo Bank

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-33718
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Wells Fargo Bank

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-33718
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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. Wells Fargo Bank

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 27 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33719

Amount of Each Disbursement this Period: 12.00

Memo Item

B. Wells Fargo Bank

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 30 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33719

Amount of Each Disbursement this Period: 36.00

Memo Item

C. William B. Terry

Full Name (Last, First, Middle Initial)

Mailing Address 530 South Eleventh Street

City Las Vegas State NV Zip Code 89101

Purpose of Disbursement Legal Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 14 / 2020

FEC Identification Number: C

Transaction ID : SB21B-33719

Amount of Each Disbursement this Period: 7500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	7548.00
TOTAL This Period (last page this line number only).....▶	779911.85