

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 AMERICAN OPPORTUNITY PAC

ADDRESS (number and street) 2600 S. DOUGLAS ROAD SUITE 900 CORAL GABLES FL 33134 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C C00684605 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special Election on 11/06/2018 in the State of FL

5. Covering Period 10/01/2018 through 10/17/2018

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

Signature of Treasurer RIESCO, JOSE, , , [Electronically Filed] Date 10/25/2018

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

AMERICAN OPPORTUNITY PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="33999.70"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="62000.00"/>	<input type="text" value="97000.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="95999.70"/>	<input type="text" value="97000.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="48308.71"/>	<input type="text" value="49309.01"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="47690.99"/>	<input type="text" value="47690.99"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

AMERICAN OPPORTUNITY PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	62000.00	97000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	62000.00	97000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	62000.00	97000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	62000.00	97000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	62000.00	97000.00

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	48308.71	49309.01
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	48308.71	49309.01
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	48308.71	49309.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	48308.71	49309.01

DETAILED SUMMARY PAGE
of Disbursements

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)	62000.00	97000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	62000.00	97000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	48308.71	49309.01
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	48308.71	49309.01

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

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

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)
AMERICAN OPPORTUNITY PAC

A. BRAMAN, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2060 BISCAYNE BLVD.
 City MIAMI State FL Zip Code 33137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTO DEALER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 03 / 2018
Transaction ID : SA11AI.4126
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. FERNANDEZ, ALEXANDER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 ALHAMBRA PLAZA SUITE 1100
 City CORAL GABLES State FL Zip Code 33134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MD CLARIFY Occupation (for Individual) DIRECTOR OF BUSINESS DEVELOP
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 08 / 2018
Transaction ID : SA11AI.4133
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. FERNANDEZ, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 ALHAMBRA PLAZA SUITE 1100
 City CORAL GABLES State FL Zip Code 33134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IDS HEALTH SYSTEMS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 08 / 2018
Transaction ID : SA11AI.4129
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 14
	<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)
AMERICAN OPPORTUNITY PAC

A. FERNANDEZ, MICHAEL, , , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 121 ALHAMBRA PLAZA
SUITE 1100

City CORAL GABLES State FL Zip Code 33134

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

Name of Employer (for Individual) MBF HEALTHCARE PARTNERS Occupation (for Individual) HEALTHCARE INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 08 / 2018

Transaction ID : SA11AI.4131

Amount of Each Receipt this Period 2500.00

Memo Item CONTRIBUTION

B. FERNANDEZ, MICHELLE, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 121 ALHAMBRA PLAZA
SUITE 1100

City CORAL GABLES State FL Zip Code 33134

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

Name of Employer (for Individual) N/A Occupation (for Individual) STUDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 08 / 2018

Transaction ID : SA11AI.4135

Amount of Each Receipt this Period 2500.00

Memo Item CONTRIBUTION

C. FERNANDEZ, MIGUEL, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 121 ALHAMBRA PLAZA
SUITE 1100

City CORAL GABLES State FL Zip Code 33134

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

Name of Employer (for Individual) MBF HEALTHCARE Occupation (for Individual) CHAIRMAN/CEO

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 10 / 05 / 2018

Transaction ID : SA11AI.4127

Amount of Each Receipt this Period 15000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 20000.00

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 8 OF 14
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN OPPORTUNITY PAC

A. INSIGNEO SECURITIES, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 BRICKELL AVE, 10TH FLOOR
 City MIAMI State FL Zip Code 33131
 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 ▼ 5000.00

Date of Receipt 10 / 15 / 2018
Transaction ID : SA11AI.4139
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

B. LONGO, ADRIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address IND. VICTOR FERNANDEZ CALLE 3 #340 SUITE 1
 City SAN JUAN State PR Zip Code 00926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) BERMUDEZ & LONGO PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 17 / 2018
Transaction ID : SA11AI.4146
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

C. MILLER, MELVYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3109 GRAND AVE #431
 City MIAMI State FL Zip Code 33133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) RETIRED RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 01 / 2018
Transaction ID : SA11AI.4143
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 14
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN OPPORTUNITY PAC

A. MILLER, MELVYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3109 GRAND AVE #431
 City MIAMI State FL Zip Code 33133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 02 / 2018
Transaction ID : SA11AI.4145
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. SPECTOR, ARTHUR B., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4401 COLLINS AVE 2-1714
 City MIAMI BEACH State FL Zip Code 33140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 17 / 2018
Transaction ID : SA11AI.4141
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

C. SUNSHINE GASOLINE DISTRIBUTORS, INC.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1650 NW 87TH AVE
 City MIAMI State FL Zip Code 33172
 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 ▼ 5000.00

Date of Receipt 10 / 09 / 2018
Transaction ID : SA11AI.4137
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12000.00
TOTAL This Period (last page this line number only).....	62000.00

**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)
AMERICAN OPPORTUNITY PAC

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 5555 HILTON AVENUE
#106

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement
TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 17 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4169
Amount of Each Disbursement this Period
600.90

Memo Item

Full Name (Last, First, Middle Initial)

B. CROSS OVER ENTERPRISES

Mailing Address 11112 GRIFFING BLVD

City BISCAYNE PARK State FL Zip Code 33161

Purpose of Disbursement
PRODUCTION SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 16 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4165
Amount of Each Disbursement this Period
2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. FORTE COMMUNICATIONS, LLC

Mailing Address 300 SOUTH DUVAL STREET
UNIT 707

City TALLAHASSEE State FL Zip Code 32301

Purpose of Disbursement
POLITICAL CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 15 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4161
Amount of Each Disbursement this Period
4520.00

Memo Item

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

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

7120.90

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICAN OPPORTUNITY PAC

Full Name (Last, First, Middle Initial)

A. GROUNDSWELL STRATEGIES

Mailing Address 770 PONCE DE LEON BLVD.
SUITE 302-B

City MIAMI State FL Zip Code 33134

Purpose of Disbursement
RADIO MEDIA BUYS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 05 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4157
Amount of Each Disbursement this Period
3300.00

Memo Item

Full Name (Last, First, Middle Initial)

B. HOWE CREATIVE GROUP, LLC

Mailing Address 1750 HIGHWAY 160 WEST
SUITE 101-304

City FORT MILL State SC Zip Code 29708

Purpose of Disbursement
MEDIA BUYS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 02 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4149
Amount of Each Disbursement this Period
5325.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MAJORITY STRATEGIES LLC

Mailing Address 12854 KENAN DRIVE
SUITE 145

City JACKSONVILLE State FL Zip Code 32258

Purpose of Disbursement
WEB DESIGN

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 02 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4151
Amount of Each Disbursement this Period
1999.00

Memo Item

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

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

10624.00

**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)
AMERICAN OPPORTUNITY PAC

Full Name (Last, First, Middle Initial) A. MAJORITY STRATEGIES LLC		Date of Disbursement MM / DD / YYYY 10 / 08 / 2018
Mailing Address 12854 KENAN DRIVE SUITE 145		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4159 Amount of Each Disbursement this Period 13000.00
City JACKSONVILLE	State FL	Zip Code 32258
Purpose of Disbursement VIDEO PRODUCTION ADS		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. MAJORITY STRATEGIES LLC		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018
Mailing Address 12854 KENAN DRIVE SUITE 145		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4163 Amount of Each Disbursement this Period 12500.00
City JACKSONVILLE	State FL	Zip Code 32258
Purpose of Disbursement SOCIAL MEDIA ADVERTISING		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. PARK AVE ASSETS LLC		Date of Disbursement MM / DD / YYYY 10 / 04 / 2018
Mailing Address 1173A 2ND AVE #381		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4153 Amount of Each Disbursement this Period 3500.00
City NEW YORK	State NY	Zip Code 10065
Purpose of Disbursement PROFESSIONAL SERVICES		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).....▶	29000.00
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)
AMERICAN OPPORTUNITY PAC

Full Name (Last, First, Middle Initial) A. REAGANISTA, LLC		Date of Disbursement MM / DD / YYYY 10 / 05 / 2018	
Mailing Address PO BOX 122		FEC Identification Number C [REDACTED]	
City TALLAHASSEE	State FL	Zip Code 32302	Transaction ID : SB21B.4155
Purpose of Disbursement REIMBURSEMENTS		Category/Type	Amount of Each Disbursement this Period 1365.87
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. DELTA		Date of Disbursement MM / DD / YYYY 10 / 05 / 2018	
Mailing Address P.O. Box 20706		FEC Identification Number C [REDACTED]	
City ATLANTA	State GA	Zip Code 30320	Transaction ID : SB21B.4155.c
Purpose of Disbursement TRAVEL EXPENSE		Category/Type	Amount of Each Disbursement this Period 324.80
Candidate Name		<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. ISLAND WING		Date of Disbursement MM / DD / YYYY 10 / 05 / 2018	
Mailing Address 1370 Market St		FEC Identification Number C [REDACTED]	
City Tallahassee	State FL	Zip Code 32312	Transaction ID : SB21B.4155.
Purpose of Disbursement LUNCH MEETING		Category/Type	Amount of Each Disbursement this Period 195.56
Candidate Name		<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	1365.87
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)
AMERICAN OPPORTUNITY PAC

A. Governors Club

Full Name (Last, First, Middle Initial)

Mailing Address 202 S Adams St,

City Tallahassee State FL Zip Code 32301

Purpose of Disbursement DINNER MEETING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
10 / 05 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4155.
Amount of Each Disbursement this Period: 239.34

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

TOTAL This Period (last page this line number only)..... ▶ 48110.77