

# 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

**OORAH! POLITICAL ACTION COMMITTEE**

ADDRESS (number and street) PO BOX 1053

Check if different than previously reported. (ACC)

BLOOMINGTON IN 47402

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

C C00551853

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

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

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

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

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

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

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

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

5. Covering Period M M M / D D D / Y Y Y Y Y Y 01 / 01 / 2018 through M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2018

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

WUSLICH, JEFF, , ,

Type or Print Name of Treasurer \_\_\_\_\_

Signature of Treasurer WUSLICH, JEFF, , , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 04 / 15 / 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

**OORAH! POLITICAL ACTION COMMITTEE**

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"/>		202548.96
(b) Cash on Hand at Beginning of Reporting Period.....	202548.96	
(c) Total Receipts (from Line 19) .....	48558.90	48558.90
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	251107.86	251107.86
7. Total Disbursements (from Line 31).....	168367.91	168367.91
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	82739.95	82739.95
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

OORAH! POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 01 / 01 / 2018 To: 03 / 31 / 2018

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	20000.00	20000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	20000.00	20000.00
12. Transfers From Affiliated/Other Party Committees.....	23334.60	23334.60
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).....	224.30	224.30
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	5000.00	5000.00
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)).....▶	48558.90	48558.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	48558.90	48558.90

**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 .....	82367.91	82367.91
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	82367.91	82367.91
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	85000.00	85000.00
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).....	1000.00	1000.00
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)) ..	168367.91	168367.91
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	168367.91	168367.91

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	20000.00	20000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	20000.00	20000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	82367.91	82367.91
37. Offsets to Operating Expenditures (from Line 15, page 3).....	224.30	224.30
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	82143.61	82143.61

**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 35
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. ANTHEM, INC. PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 120 MONUMENT CIRCLE

City INDIANAPOLIS	State IN	Zip Code 46204-4906
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FEC ID number of contributing federal political committee. **C** C00197228

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2018

**Transaction ID : SA11C.39775**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. BIOTECHNOLOGY INDUSTRY ORGANIZATION PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1201 MARYLAND AVE, SW  
STE. 900

City WASHINGTON	State DC	Zip Code 20024-6129
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00355677

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2018

**Transaction ID : SA11C.39773**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C. ELI LILLY AND COMPANY PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address LILLY CORPORATE CENTER

City INDIANAPOLIS	State IN	Zip Code 46285-0001
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FEC ID number of contributing federal political committee. **C** C00082792

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2018

**Transaction ID : SA11C.39793**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 35
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. HALL RENDER KILLIAN HEATH & LYMAN PC EMPLOYEE PAC**

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

Mailing Address 1 AMERICAN SQUARE  
SUITE 2000

City INDIANAPOLIS State IN Zip Code 46282-0004

FEC ID number of contributing federal political committee. **C** C00552083

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 29 / 2018

**Transaction ID : SA11C.39792**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. INDIANA ASSN OF RURAL ELECTRIC COOP PAC (IN ACTION CMTE RURA**

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

Mailing Address 720 N HIGH SCHOOL ROAD

City INDIANAPOLIS State IN Zip Code 46214-3756

FEC ID number of contributing federal political committee. **C** C00103978

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2018

**Transaction ID : SA11C.39751**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C.**

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	20000.00

**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 35
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. YOUNG HOOSIER VICTORY FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 1053

City BLOOMINGTON	State IN	Zip Code 47402-1053
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FEC ID number of contributing federal political committee. **C** C00634915

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
23334.60

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2018

**Transaction ID : SA12.39754**

Amount of Each Receipt this Period  
19327.40

Memo Item  
TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

**B. KITTLE, JEFFREY, L., MR.,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 5720 SUNSET LN

City INDIANAPOLIS	State IN	Zip Code 46228-1448
----------------------	-------------	------------------------

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

Name of Employer (for Individual) HKP CORPORATION	Occupation (for Individual) PRESIDENT & CEO
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2017

**Transaction ID : SA.39728.7.1801**

Amount of Each Receipt this Period  
4600.00

Memo Item  
TRANSFER

TRANSFER FROM YOUNG HOOSIER VICTORY FUND

**C. PFAUTCH, ROY, , MR.,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 52 PORTLAND PLACE

City SAINT LOUIS	State MO	Zip Code 63108-1242
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CIVIL SERVICE INC.	Occupation (for Individual) CONSULTANT
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	27	/	2018

**Transaction ID : SA.39747.7.1801**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM YOUNG HOOSIER VICTORY FUND

<b>SUBTOTAL</b> of Receipts This Page (optional).....	19327.40
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 35
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. RUSSO, JAMES, M., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 116 REINACH LANE  
 City NEW BERN State NC Zip Code 28562-7067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ALTRUIS CAPITAL MANAGEMENT, INC. Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 5000.00

Date of Receipt **01 / 18 / 2018**  
**Transaction ID : SA.39745.7.1801**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM YOUNG HOOSIER VICTORY FUND

**B. SLATER, KENNETH, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 222 LAKEVIEW AVENUE SUITE 1630  
 City WEST PALM BEACH State FL Zip Code 33401-6100  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TREMONT PARTNERS, LLC Occupation (for Individual) PRINCIPAL  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 4600.00

Date of Receipt **12 / 30 / 2017**  
**Transaction ID : SA.39702.7.1801**  
 Amount of Each Receipt this Period 4600.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM YOUNG HOOSIER VICTORY FUND

**C. WHITING, JEFFREY, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8801 DUNSMUIR DRIVE  
 City INDIANAPOLIS State IN Zip Code 46260-1744  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CREA, LLC Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 5000.00

Date of Receipt **01 / 19 / 2018**  
**Transaction ID : SA.39746.7.1801**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM YOUNG HOOSIER VICTORY FUND

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 35
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. YOUNG HOOSIER VICTORY FUND**

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

Mailing Address PO BOX 1053

City BLOOMINGTON	State IN	Zip Code 47402-1053
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FEC ID number of contributing federal political committee. **C** C00634915

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
23334.60

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2018

**Transaction ID : SA12.39779**

Amount of Each Receipt this Period  
4007.20

Memo Item  
TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

**B. ROOPE, CALEB, J., ,**

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

Mailing Address 550 W STATE ST

City EAGLE	State ID	Zip Code 83616-
---------------	-------------	--------------------

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

Name of Employer (for Individual) THE PACIFIC COMPANIES	Occupation (for Individual) DEVELOPER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2018

**Transaction ID : SA.39769.7.1802**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM YOUNG HOOSIER VICTORY FUND

**C.**

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

Mailing Address

City	State	Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4007.20
<b>TOTAL</b> This Period (last page this line number only).....▶	23334.60

# 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 35	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. DELTA AIR LINES**

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

Mailing Address P.O. BOX 20706

City ATLANTA	State GA	Zip Code 30320-6001
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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 ▼  
224.30

Date of Receipt  

M M	/	D D	/	Y Y Y Y
02		23		2018

**Transaction ID : SA15.7963**

Amount of Each Receipt this Period  
224.30

Memo Item  
REFUND: TRAVEL

**B.**

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

**C.**

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	224.30
<b>TOTAL</b> This Period (last page this line number only).....▶	224.30

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 35
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" 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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. JEFF FLAKE FOR US SENATE INC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 12512  
 City TEMPE State AZ Zip Code 85284  
 FEC ID number of contributing federal political committee. **C** C00347260  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2018  
**Transaction ID : SA16.7985**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
**REFUND OF POLITICAL CONTRIBUTION**

**B.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	5000.00

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. ACQUA AL 2 D.C.**

Full Name (Last, First, Middle Initial)

Mailing Address 212 7TH STREET SE

City WASHINGTON State DC Zip Code 20003-4311

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 31 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I7940

Amount of Each Disbursement this Period: 70.28

Memo Item

**B. AMERICAN AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BOULEVARD

City FORT WORTH State TX Zip Code 76155-2605

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 11 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I7911

Amount of Each Disbursement this Period: 175.30

Memo Item

**C. AMERICAN AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BOULEVARD

City FORT WORTH State TX Zip Code 76155-2605

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 22 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I7925

Amount of Each Disbursement this Period: 429.30

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 674.88

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City  
FORT WORTH

State  
TX

Zip Code  
76155-2605

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
01			22			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I7926

Amount of Each Disbursement this Period

[REDACTED] 476.01

Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City  
FORT WORTH

State  
TX

Zip Code  
76155-2605

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
02			01			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I7941

Amount of Each Disbursement this Period

[REDACTED] 113.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City  
FORT WORTH

State  
TX

Zip Code  
76155-2605

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
02			13			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I7959

Amount of Each Disbursement this Period

[REDACTED] 350.30

Memo Item

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

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

[REDACTED] 939.31

[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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City FORT WORTH State TX Zip Code 76155-2605

Purpose of Disbursement TRAVEL

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.I7997**  
 Amount of Each Disbursement this Period  
 222.20

Memo Item

Full Name (Last, First, Middle Initial)

**B. AMTRAK**

Mailing Address 60 MASSACHUSETTS AVENUE NE

City WASHINGTON State DC Zip Code 20002-4285

Purpose of Disbursement TRAVEL

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
02 / 05 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.I7943**  
 Amount of Each Disbursement this Period  
 168.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. BISTRO BIS**

Mailing Address 15 E STREET NW

City WASHINGTON State DC Zip Code 20001-1501

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.I7977**  
 Amount of Each Disbursement this Period  
 188.78

Memo Item

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

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

578.98

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. BISTRO CACAO</b>		Date of Disbursement MM / DD / YYYY 01 / 22 / 2018	
Mailing Address 320 MASS. AVE, NE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7924</b> Amount of Each Disbursement this Period 91.64	
City WASHINGTON	State DC	Zip Code 20002	Category/ Type
Purpose of Disbursement FOOD/BEVERAGE		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>B. BISTRO CACAO</b>		Date of Disbursement MM / DD / YYYY 03 / 14 / 2018	
Mailing Address 320 MASS. AVE, NE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7986</b> Amount of Each Disbursement this Period 75.59	
City WASHINGTON	State DC	Zip Code 20002	Category/ Type
Purpose of Disbursement FOOD/BEVERAGE		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>C. BROGHAMER CONSULTING LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2018	
Mailing Address 411 WALNUT STREET PMB 300		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7907</b> Amount of Each Disbursement this Period 1505.36	
City GREEN COVE SPRINGS	State FL	Zip Code 32043-2006	Category/ Type
Purpose of Disbursement COMPLIANCE CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1672.59
<b>TOTAL</b> 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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. BROGHAMER CONSULTING LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 13 / 2018
Mailing Address 411 WALNUT STREET PMB 300		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I7955</b> Amount of Each Disbursement this Period [ ] 1502.68
City GREEN COVE SPRINGS	State FL	Zip Code 32043-2006
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. BROGHAMER CONSULTING LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 05 / 2018
Mailing Address 411 WALNUT STREET PMB 300		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I7967</b> Amount of Each Disbursement this Period [ ] 1517.97
City GREEN COVE SPRINGS	State FL	Zip Code 32043-2006
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CHICK-FIL-A</b>		Date of Disbursement MM / DD / YYYY 03 / 26 / 2018
Mailing Address 5200 BUFFINGTON RD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I7996</b> Amount of Each Disbursement this Period [ ] 156.20
City ATLANTA	State GA	Zip Code 30349-2945
Purpose of Disbursement FOOD/BEVERAGE		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)..... ▶

3176.85

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement SOFTWARE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
01 / 09 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.I7914**  
 Amount of Each Disbursement this Period  
 125.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement SOFTWARE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
02 / 08 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.I7949**  
 Amount of Each Disbursement this Period  
 125.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. CMDI**

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement SOFTWARE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
03 / 08 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.I7978**  
 Amount of Each Disbursement this Period  
 125.00

Memo Item

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

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

375.00

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. COLADA CUBAN COFFEE</b>		Date of Disbursement MM / DD / YYYY 01 / 17 / 2018	
Mailing Address 525 N FEDERAL HWY #400		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7918</b> Amount of Each Disbursement this Period 16.84	
City FORT LAUDERDALE	State FL	Zip Code 33301	Category/ Type
Purpose of Disbursement FOOD/BEVERAGE			
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>B. COURTYARD BY MARRIOTT</b>		Date of Disbursement MM / DD / YYYY 03 / 05 / 2018	
Mailing Address 10400 FERNWOOD RD		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7975</b> Amount of Each Disbursement this Period 215.88	
City BETHESDA	State MD	Zip Code 20817	Category/ Type
Purpose of Disbursement TRAVEL			
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>C. COURTYARD BY MARRIOTT</b>		Date of Disbursement MM / DD / YYYY 03 / 05 / 2018	
Mailing Address 10400 FERNWOOD RD		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7976</b> Amount of Each Disbursement this Period 231.30	
City BETHESDA	State MD	Zip Code 20817	Category/ Type
Purpose of Disbursement TRAVEL			
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	464.02
<b>TOTAL</b> 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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. DELTA AIR LINES</b>		Date of Disbursement MM / DD / YYYY 01 / 30 / 2018
Mailing Address P.O. BOX 20706		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7937</b> Amount of Each Disbursement this Period [REDACTED] 224.30
City ATLANTA	State GA	Zip Code 30320-6001
Purpose of Disbursement TRAVEL		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. DELTA AIR LINES</b>		Date of Disbursement MM / DD / YYYY 01 / 30 / 2018
Mailing Address P.O. BOX 20706		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7938</b> Amount of Each Disbursement this Period [REDACTED] 402.30
City ATLANTA	State GA	Zip Code 30320-6001
Purpose of Disbursement TRAVEL		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. DICKS SPORTING GOODS</b>		Date of Disbursement MM / DD / YYYY 02 / 02 / 2018
Mailing Address 345 COURT ST.		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7942</b> Amount of Each Disbursement this Period [REDACTED] 49.19
City CORAOPOLIS	State PA	Zip Code 15108
Purpose of Disbursement APPAREL		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 675.79
<b>TOTAL</b> 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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. DUNKIN DONUTS**

Mailing Address 130 ROYALL STREET

City CANTON State MA Zip Code 02021-1010

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I7922  
Amount of Each Disbursement this Period  
58.26

Memo Item

Full Name (Last, First, Middle Initial)

**B. EC CONSULTING, LLC**

Mailing Address 526 6TH STREET SE

City WASHINGTON State DC Zip Code 20003-2705

Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 13 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I7953  
Amount of Each Disbursement this Period  
22830.76

Memo Item

Full Name (Last, First, Middle Initial)

**C. GAMBA RISTORANTE**

Mailing Address 455 E 84TH DR

City MERRILLVILLE State IN Zip Code 46410

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 22 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I7973  
Amount of Each Disbursement this Period  
1227.00

Memo Item

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

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

24116.02

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. HAMPTON INN**

Full Name (Last, First, Middle Initial)

Mailing Address 7930 JONES BRANCH DRIVE

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 18 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I7920

Amount of Each Disbursement this Period: 181.61

Memo Item

**B. HAMPTON INN**

Full Name (Last, First, Middle Initial)

Mailing Address 7930 JONES BRANCH DRIVE

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 18 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I7921

Amount of Each Disbursement this Period: 181.61

Memo Item

**C. HAMPTON INN**

Full Name (Last, First, Middle Initial)

Mailing Address 7930 JONES BRANCH DRIVE

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 19 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I7923

Amount of Each Disbursement this Period: 207.44

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 570.66

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. HOLIDAY BOWL**

Mailing Address P.O. BOX 601400

City: SAN DIEGO State: CA Zip Code: 92160

Purpose of Disbursement: EVENT TICKETS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I7934  
Amount of Each Disbursement this Period  
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. HOLIDAY BOWL**

Mailing Address P.O. BOX 601400

City: SAN DIEGO State: CA Zip Code: 92160

Purpose of Disbursement: EVENT TICKETS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I7981  
Amount of Each Disbursement this Period  
10664.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. JOE'S SEAFOOD, PRIME STEAK & STONE CRAB**

Mailing Address 750 15TH ST NW

City: WASHINGTON State: DC Zip Code: 20005

Purpose of Disbursement: FOOD/BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 11 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I7913  
Amount of Each Disbursement this Period  
610.56

Memo Item

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

12274.56

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

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. LIMESTONE STRATEGIES**

Mailing Address 5975 CASTLE CREEK PKWY N DR, STE 4

City INDIANAPOLIS State IN Zip Code 46250-4346

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I7930**  
 Amount of Each Disbursement this Period  
 [ ] 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. LIMESTONE STRATEGIES**

Mailing Address 5975 CASTLE CREEK PKWY N DR, STE 4

City INDIANAPOLIS State IN Zip Code 46250-4346

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I7954**  
 Amount of Each Disbursement this Period  
 [ ] 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. LIMESTONE STRATEGIES**

Mailing Address 5975 CASTLE CREEK PKWY N DR, STE 4

City INDIANAPOLIS State IN Zip Code 46250-4346

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	1	8

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I7992**  
 Amount of Each Disbursement this Period  
 [ ] 5000.00

Memo Item

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

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

[ ] 15000.00  
 [ ]



**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. LYFT**

Mailing Address 185 BERRY ST

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.I7917**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. LYFT**

Mailing Address 185 BERRY ST

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.I7964**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. LYFT**

Mailing Address 185 BERRY ST

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.I7974**  
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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MIGHT AND MAIN, LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2018	
Mailing Address 1821 E RUBY LANE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I7906</b>	
City BLOOMINGTON	State IN	Zip Code 47401-6054	Amount of Each Disbursement this Period [ ] 1000.00
Purpose of Disbursement FINANCE CONSULTING		Category/Type [ ]	Memo Item <input type="checkbox"/>
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>B. MIGHT AND MAIN, LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 13 / 2018	
Mailing Address 1821 E RUBY LANE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I7952</b>	
City BLOOMINGTON	State IN	Zip Code 47401-6054	Amount of Each Disbursement this Period [ ] 1000.00
Purpose of Disbursement FINANCE CONSULTING		Category/Type [ ]	Memo Item <input type="checkbox"/>
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>C. MIGHT AND MAIN, LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 05 / 2018	
Mailing Address 1821 E RUBY LANE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I7966</b>	
City BLOOMINGTON	State IN	Zip Code 47401-6054	Amount of Each Disbursement this Period [ ] 1000.00
Purpose of Disbursement FINANCE CONSULTING		Category/Type [ ]	Memo Item <input type="checkbox"/>
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 3000.00
<b>TOTAL</b> 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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. O'DONNELL AND ASSOCIATES, LTD.**

Mailing Address 829 EMERALD DRIVE

City ALEXANDRIA State VA Zip Code 22308

Purpose of Disbursement  
COMMUNICATIONS CONSULTING

Candidate Name

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

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
01 / 10 / 2018

FEC Identification Number

C   
**Transaction ID : SB21B.I7908**  
Amount of Each Disbursement this Period  
 2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. O'DONNELL AND ASSOCIATES, LTD.**

Mailing Address 829 EMERALD DRIVE

City ALEXANDRIA State VA Zip Code 22308

Purpose of Disbursement  
COMMUNICATIONS CONSULTING

Candidate Name

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

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
02 / 13 / 2018

FEC Identification Number

C   
**Transaction ID : SB21B.I7956**  
Amount of Each Disbursement this Period  
 2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. O'DONNELL AND ASSOCIATES, LTD.**

Mailing Address 829 EMERALD DRIVE

City ALEXANDRIA State VA Zip Code 22308

Purpose of Disbursement  
COMMUNICATIONS CONSULTING

Candidate Name

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

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
03 / 05 / 2018

FEC Identification Number

C   
**Transaction ID : SB21B.I7968**  
Amount of Each Disbursement this Period  
 2500.00

Memo Item

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

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

7500.00

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. RELATIONSHIP SCIENCE LLC**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 347989

City PITTSBURGH State PA Zip Code 15251-4989

Purpose of Disbursement SUBSCRIPTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 31 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I7931

Amount of Each Disbursement this Period: 1200.00

Memo Item

**B. RPM ITALIAN**

Full Name (Last, First, Middle Initial)

Mailing Address 650 K ST NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 09 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I7950

Amount of Each Disbursement this Period: 73.50

Memo Item

**C. RUTHS CHRIS STEAK HOUSE**

Full Name (Last, First, Middle Initial)

Mailing Address 1030 W CANTON AVE, STE 100

City WINTER PARK State FL Zip Code 32789-3050

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 21 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I7962

Amount of Each Disbursement this Period: 1037.40

Memo Item

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

2310.90

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. SOCKO STRATEGIES, LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 31 / 2018	
Mailing Address 2438 TUNLAW ROAD NW		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7933</b> Amount of Each Disbursement this Period 2500.00	
City WASHINGTON	State DC	Zip Code 20007	Category/ Type
Purpose of Disbursement FINANCE CONSULTING		Memo Item <input type="checkbox"/>	
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>B. SOCKO STRATEGIES, LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 13 / 2018	
Mailing Address 2438 TUNLAW ROAD NW		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7957</b> Amount of Each Disbursement this Period 2500.00	
City WASHINGTON	State DC	Zip Code 20007	Category/ Type
Purpose of Disbursement FINANCE CONSULTING		Memo Item <input type="checkbox"/>	
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>C. SOCKO STRATEGIES, LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 27 / 2018	
Mailing Address 2438 TUNLAW ROAD NW		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7993</b> Amount of Each Disbursement this Period 2500.00	
City WASHINGTON	State DC	Zip Code 20007	Category/ Type
Purpose of Disbursement FINANCE CONSULTING		Memo Item <input type="checkbox"/>	
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7500.00
<b>TOTAL</b> 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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235-1908

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 13 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I7958  
Amount of Each Disbursement this Period  
316.98

Memo Item

Full Name (Last, First, Middle Initial)

**B. STARBUCKS**

Mailing Address PO BOX 34067

City SEATTLE State WA Zip Code 98124-1067

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 17 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I7916  
Amount of Each Disbursement this Period  
9.38

Memo Item

Full Name (Last, First, Middle Initial)

**C. TAXI**

Mailing Address INFORMATION REQUESTED

City WASHINGTON State DC Zip Code 99999

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 17 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I7919  
Amount of Each Disbursement this Period  
21.00

Memo Item

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

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

347.36

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. THE MONOCLE RESTAURANT**

Full Name (Last, First, Middle Initial)

Mailing Address 107 D STREET NE

City WASHINGTON State DC Zip Code 20002-5657

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 31 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I7939

Amount of Each Disbursement this Period: 326.05

Memo Item

**B. UNITED AIRLINES, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 8909 PURDUE ROAD, SUITE 400

City INDIANAPOLIS State IN Zip Code 46268-3149

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 11 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I7912

Amount of Each Disbursement this Period: 181.30

Memo Item

**C. UNITED AIRLINES, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 8909 PURDUE ROAD, SUITE 400

City INDIANAPOLIS State IN Zip Code 46268-3149

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 25 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I7927

Amount of Each Disbursement this Period: 458.60

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 965.95

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address 475 LENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260-0004

Purpose of Disbursement  
POSTAGE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
01 / 02 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I7905  
Amount of Each Disbursement this Period  
54.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. WILDFIRE**

Mailing Address 2001 INTERNATIONAL DR

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
03 / 18 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I7987  
Amount of Each Disbursement this Period  
76.45

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C  
Amount of Each Disbursement this Period

Memo Item

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

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

130.45  
82367.91



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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. CINDY HYDE-SMITH FOR US SENATE</b>		Date of Disbursement MM / DD / YYYY 03 / 30 / 2018
Mailing Address PO BOX 2390		FEC Identification Number C C00675348 <b>Transaction ID : SB23.I7995</b> Amount of Each Disbursement this Period 5000.00
City JACKSON	State MS	Zip Code 39207
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/Type
Candidate Name <b>HYDE-SMITH, CINDY, , ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: MS	District:	

Full Name (Last, First, Middle Initial) <b>B. CRAMER FOR SENATE</b>		Date of Disbursement MM / DD / YYYY 03 / 14 / 2018
Mailing Address PO BOX 396		FEC Identification Number C C00504704 <b>Transaction ID : SB23.I7982</b> Amount of Each Disbursement this Period 5000.00
City BISMARCK	State ND	Zip Code 58502
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/Type
Candidate Name <b>CRAMER, KEVIN, , ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: ND	District: 00	

Full Name (Last, First, Middle Initial) <b>C. JOSH HAWLEY FOR SENATE</b>		Date of Disbursement MM / DD / YYYY 03 / 14 / 2018
Mailing Address 7253 WATSON RD #1090		FEC Identification Number C C00652727 <b>Transaction ID : SB23.I7983</b> Amount of Each Disbursement this Period 5000.00
City ST LOUIS	State MO	Zip Code 63119
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/Type
Candidate Name <b>HAWLEY, JOSHUA, DAVID, ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MO	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	15000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. MARSHA FOR SENATE**

Full Name (Last, First, Middle Initial)  
MARSHA FOR SENATE

Date of Disbursement: 03 / 14 / 2018

Mailing Address: PO BOX 3986

City: WASHINGTON State: DC Zip Code: 20027

Purpose of Disbursement: POLITICAL CONTRIBUTION

Candidate Name: BLACKBURN, MARSHA , , ,

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: TN District:

FEC Identification Number: C00376939  
Transaction ID: SB23.I7984  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**B. WALORSKI FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)  
WALORSKI FOR CONGRESS INC

Date of Disbursement: 03 / 14 / 2018

Mailing Address: 59555 COUNTY ROAD 3

City: ELKHART State: IN Zip Code: 46517-0954

Purpose of Disbursement: POLITICAL CONTRIBUTION

Candidate Name: WALORSKI, JACKIE, SWIHART, ,

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: IN District: 02

FEC Identification Number: C00468579  
Transaction ID: SB23.I7980  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**C. NRSC**

Full Name (Last, First, Middle Initial)  
NRSC

Date of Disbursement: 01 / 31 / 2018

Mailing Address: 425 2ND STREET NE

City: WASHINGTON State: DC Zip Code: 20002

Purpose of Disbursement: POLITICAL CONTRIBUTION

Candidate Name:

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: C00027466  
Transaction ID: SB23.I7932  
Amount of Each Disbursement this Period: 60000.00

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	70000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	85000.00

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

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NAME OF COMMITTEE (In Full)

**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF MIKE DELPH**

Mailing Address PO BOX 3681

City  
CARMEL

State  
IN

Zip Code  
46082

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [ ]

Transaction ID : SB29.I7969

Amount of Each Disbursement this Period

[ ] 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

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

[ ] 1000.00

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

[ ] 1000.00