

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

ESAFund

ADDRESS (number and street) 610 S. Boulevard

Check if different than previously reported. (ACC) Tampa FL 33606

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

C C00489856

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

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

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

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|---|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input checked="" type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on 11 / 06 / 2018 in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on / / in the State of

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.

Watkins, Nancy H., , ,

Type or Print Name of Treasurer _____

Signature of Treasurer Watkins, Nancy H., , , [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.

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

ESAFund

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"/>	<input type="text" value="105921.66"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2096451.34"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1500000.00"/>	<input type="text" value="3500000.00"/>
(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="3596451.34"/>	<input type="text" value="3605921.66"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1240467.42"/>	<input type="text" value="1249937.74"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2355983.92"/>	<input type="text" value="2355983.92"/>
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

ESAFund

Report Covering the Period: From: 10 / 01 / 2018 To: 10 / 17 / 2018

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

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).....	1500000.00	3500000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1500000.00	3500000.00
(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)	1500000.00	3500000.00
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)).....▶	1500000.00	3500000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1500000.00	3500000.00

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	0.00	9470.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	9470.32
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	200000.00	200000.00
24. Independent Expenditures (use Schedule E)	1040467.42	1040467.42
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)) ..	1240467.42	1249937.74
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1240467.42	1249937.74

DETAILED SUMMARY PAGE
of Disbursements

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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)	1500000.00	3500000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1500000.00	3500000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	9470.32
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	9470.32

**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 9
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <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)
ESAFund

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ricketts, Marlene, , ,

Mailing Address P. O. Box 31519

City Omaha	State NE	Zip Code 68131
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) n/a	Occupation (for Individual) retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		05		2018

Transaction ID : SA11AI.7454

Amount of Each Receipt this Period
1500000.00

Memo Item

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

SUBTOTAL of Receipts This Page (optional).....▶	1500000.00
TOTAL This Period (last page this line number only).....▶	1500000.00

**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 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

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)
ESAFund

Full Name (Last, First, Middle Initial) A. Missouri Action Rising		Date of Disbursement MM / DD / YYYY 10 / 10 / 2018
Mailing Address 131 East High Street		FEC Identification Number C 000652875 Transaction ID : SB23.7470
City Jefferson City	State MO	Zip Code 65101
Purpose of Disbursement contribution		Amount of Each Disbursement this Period 100000.00
Candidate Name		Category/Type
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. New Republican PAC		Date of Disbursement MM / DD / YYYY 10 / 10 / 2018
Mailing Address 204 S. Monroe Street Suite 201-A		FEC Identification Number C 000544544 Transaction ID : SB23.7468
City Tallahassee	State FL	Zip Code 32301
Purpose of Disbursement contribution		Amount of Each Disbursement this Period 100000.00
Candidate Name		Category/Type
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.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Category/Type
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)..... ▶

200000.00

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

200000.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
ESAFund
FEC IDENTIFICATION NUMBER
C C00489856

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
CD, Inc.
Mailing Address
P. O. Box 1877
City
Alexandria
State
VA
Zip Code
22313
Purpose of Expenditure
advertising
Category/
Type

Date of Public Distribution/Dissemination
10 / 06 / 2018
Amount
100000.00
Transaction ID : SE.7465
Date of Disbursement or Obligation
10 / 09 / 2018

Name of Federal Candidate:
O'Rourke, Robert (Beto), ,
Support
Oppose
Office Sought:
House
Senate
District:
State: TX

Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Del Cielo Media, LLC
Mailing Address
1427 Leslie Avenue
Suite 102
City
Alexandria
State
VA
Zip Code
22301
Purpose of Expenditure
media placement
Category/
Type

Date of Public Distribution/Dissemination
10 / 06 / 2018
Amount
849615.00
Transaction ID : SE.7459
Date of Disbursement or Obligation
10 / 05 / 2018

Name of Federal Candidate:
O'Rourke, Robert (Beto), ,
Support
Oppose
Office Sought:
House
Senate
District:
State: TX

Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
949615.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature
Watkins, Nancy H., ,
[Electronically Filed]
Date
10 / 25 / 2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
ESAFund
FEC IDENTIFICATION NUMBER
C C00489856

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: McCarthy Hennings Media, Inc.
Mailing Address: 1850 M Street, N.W., #235
City: Washington, State: DC, Zip Code: 20004
Purpose of Expenditure: media production
Category/Type:
Name of Federal Candidate: O'Rourke, Robert (Beto), ,
Office Sought: Senate, State: TX
Amount: 16452.42
Transaction ID: SE.7460
Date of Disbursement or Obligation: 10/05/2018
Disbursement For: General 2018

Full Name of Payee: Wilson Research Strategies
Mailing Address: 1319 Classen Drive
City: Oklahoma City, State: OK, Zip Code: 73103
Purpose of Expenditure: research
Category/Type:
Name of Federal Candidate: O'Rourke, Robert (Beto), ,
Office Sought: Senate, State: TX
Amount: 74400.00
Transaction ID: SE.7457
Date of Disbursement or Obligation: 10/04/2018
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures: 90852.42
(b) SUBTOTAL of Unitemized Independent Expenditures:
(c) TOTAL Independent Expenditures: 1040467.42

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Watkins, Nancy H., ,

[Electronically Filed]

Date 10/25/2018

Signature