

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**

UNITED POLICE OFFICERS ASSOCIATION

ADDRESS (number and street) **8120 FENTON ST**

STE 202

Check if different than previously reported. (ACC) **SILVER SPRING MD 20910**

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

C **C00664938** 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: 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 through M M M / D D D / Y Y Y Y Y Y

01 01 2019 through **06 30 2019**

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

Type or Print Name of Treasurer **Bass, Zachary, , ,**

Signature of Treasurer **Bass, Zachary, , ,** [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y

07 13 2019

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)

Page 2

Write or Type Committee Name

UNITED POLICE OFFICERS ASSOCIATION

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="2019"/>	<input type="text" value="16256.60"/>	<input type="text" value="16256.60"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="16256.60"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="2571426.33"/>	<input type="text" value="2571426.33"/>
(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="2587682.93"/>	<input type="text" value="2587682.93"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="2577731.71"/>	<input type="text" value="2577731.71"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="9951.22"/>	<input type="text" value="9951.22"/>
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

UNITED POLICE OFFICERS ASSOCIATION

Report Covering the Period: From: 01 / 01 / 2019 To: 06 / 30 / 2019

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).....	26096.00	26096.00
(ii) Unitemized	2545330.33	2545330.33
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2571426.33	2571426.33
(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)	2571426.33	2571426.33
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)).....▶	2571426.33	2571426.33
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2571426.33	2571426.33

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	2508731.71	2508731.71
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2508731.71	2508731.71
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	69000.00	69000.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2577731.71	2577731.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2577731.71	2577731.71

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2571426.33	2571426.33
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2571426.33	2571426.33
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2508731.71	2508731.71
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2508731.71	2508731.71

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: F3XN
Transaction ID :

Our PAC makes its best efforts to collect required record keeping information for individuals who have contributed more than \$200 in a calendar year. All original solicitation contain a clear and conspicuous request for the required contributor information on reply materials with the required explanatory statement. If the information is not provided to the Committee, then we will follow up by sending a letter to the donor within 30 days of the donation requesting the missing information. This letter is sent by itself with no solicitation. It clearly requests the missing information, informs the donor that federal law requires that we report this information and includes a return envelope. We then make sure to update the records and report any additional information to the Commission prior to our next reporting date, or as memo entries in the next regularly scheduled report. For reporting purposes we have used the term 'Donor Outreach' on our Schedule B supporting line 21(b). We have contracted multiple companies to provide 'Donor Outreach' services for us. 'DonorOutreach' services include but are not limited to FUNDRAISING ACTIVITIES, DONOR DATABASE MANAGEMENT, CAGING AND ESROW, DIRECT MAIL SERVICES, Letterhead/Envelopes/Stationary and List Acquisition

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ASKEW, MEGAN, , ,

Mailing Address 4201 MONTEREY OAKS BLVD APT 707

City AUSTIN	State TX	Zip Code 78749
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2019

Transaction ID : SA11AI.5187

Amount of Each Receipt this Period
350.00

Memo Item

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

Mailing Address 1385 MARSEILLE LN

City ROSEVILLE	State CA	Zip Code 95747
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2019

Transaction ID : SA11AI.5264

Amount of Each Receipt this Period
300.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. AVENT, SHARON, , ,

Mailing Address 12930 LOCK BLVD

City HASTINGS	State MN	Zip Code 55033
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2019

Transaction ID : SA11AI.5141

Amount of Each Receipt this Period
250.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. AVERY, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5000 FAWN MDWS APT 125
 City SAN ANTONIO State TX Zip Code 78240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **03 / 07 / 2019**
Transaction ID : SA11AI.5179
 Amount of Each Receipt this Period 250.00
 Memo Item

B. AVERY, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5000 FAWN MDWS APT 125
 City SAN ANTONIO State TX Zip Code 78240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt **04 / 24 / 2019**
Transaction ID : SA11AI.5180
 Amount of Each Receipt this Period 55.00
 Memo Item

C. BARBRE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3480 S FLORENCE PL
 City TULSA State OK Zip Code 74105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST EFFORTS Occupation (for Individual) BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 12 / 2019**
Transaction ID : SA11AI.5160
 Amount of Each Receipt this Period 105.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	410.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 67
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. BARNHILL, CYNTHIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12541 FOREST CANYON DR

City PARKER	State CO	Zip Code 80138
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2019

Transaction ID : SA11AI.5194

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 1935 11TH ST

City SANTA MONICA	State CA	Zip Code 90404
----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2019

Transaction ID : SA11AI.5229

Amount of Each Receipt this Period
200.00

Memo Item

C. BOLDT, DEBORAH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15655 DOVE MDW

City SAN ANTONIO	State TX	Zip Code 78248
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2019

Transaction ID : SA11AI.5181

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. BOURQUE, SHARI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1013 SPYGLASS LN
 City WAXHAW State NC Zip Code 28173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST EFFORTS Occupation (for Individual) BEST EFFORTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 01 / 2019
Transaction ID : SA11AI.5096
 Amount of Each Receipt this Period 500.00
 Memo Item

B. BRENNER, BRANDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 69363 COUNTY ROAD 13
 City NEW PARIS State IN Zip Code 46553
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST EFFORTS Occupation (for Individual) BEST EFFORTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 30 / 2019
Transaction ID : SA11AI.5138
 Amount of Each Receipt this Period 300.00
 Memo Item

C. BRIDENSTINE, LEANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37416 HACKNEY PL
 City DADE CITY State FL Zip Code 33523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST EFFORTS Occupation (for Individual) BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 04 / 09 / 2019
Transaction ID : SA11AI.5120
 Amount of Each Receipt this Period 220.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1020.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. BRINTS, KYLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2827 CENTER DR

City VERNON	State TX	Zip Code 76384
----------------	-------------	-------------------

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

Name of Employer (for Individual) Power Lineman	Occupation (for Individual) American Electric Power
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		25		2019

Transaction ID : SA11AI.5166

Amount of Each Receipt this Period
101.00

Memo Item

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

Mailing Address 12503 123RD ST E # 78

City PUYALLUP	State WA	Zip Code 98374
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2019

Transaction ID : SA11AI.5283

Amount of Each Receipt this Period
150.00

Memo Item

C. BURTON, VALERIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12503 123RD ST E # 78

City PUYALLUP	State WA	Zip Code 98374
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2019

Transaction ID : SA11AI.5282

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	451.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 12 OF 67
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
UNITED POLICE OFFICERS ASSOCIATION

A. BUSSE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 BYRON ST APT 308
 City PALO ALTO State CA Zip Code 94301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST EFFORTS Occupation (for Individual) BEST EFFORTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 01 / 26 / 2019
Transaction ID : SA11AI.5255
 Amount of Each Receipt this Period 350.00
 Memo Item

B. BUSSE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 BYRON ST APT 308
 City PALO ALTO State CA Zip Code 94301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST EFFORTS Occupation (for Individual) BEST EFFORTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 28 / 2019
Transaction ID : SA11AI.5254
 Amount of Each Receipt this Period 150.00
 Memo Item

C. BUSSE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 BYRON ST APT 308
 City PALO ALTO State CA Zip Code 94301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST EFFORTS Occupation (for Individual) BEST EFFORTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 05 / 31 / 2019
Transaction ID : SA11AI.5256
 Amount of Each Receipt this Period 150.00
 Memo Item

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

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

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

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. CLARK, JOAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3031 HIGHWAY 231

City DOE RUN	State MO	Zip Code 63637
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2019

Transaction ID : SA11AI.5149

Amount of Each Receipt this Period
300.00

Memo Item

B. CLARK, JOAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3031 HIGHWAY 231

City DOE RUN	State MO	Zip Code 63637
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2019

Transaction ID : SA11AI.5148

Amount of Each Receipt this Period
75.00

Memo Item

C. CLARK, KELLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7600 NE ZACHARIASEN CT

City HANSVILLE	State WA	Zip Code 98340
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2019

Transaction ID : SA11AI.5280

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	625.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 14 OF 67
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
UNITED POLICE OFFICERS ASSOCIATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. COAN, RICHARD, , ,
 Mailing Address 3377 MILL VISTA RD UNIT 3607

City HIGHLANDS RANCH	State CO	Zip Code 80129
-------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 215.00

Date of Receipt
 06 / 17 / 2019
Transaction ID : SA11AI.5192

Amount of Each Receipt this Period
 75.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. COOK, DONNA, , ,
 Mailing Address 15951 W EVANS DR

City SURPRISE	State AZ	Zip Code 85379
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 06 / 23 / 2019
Transaction ID : SA11AI.5212

Amount of Each Receipt this Period
 100.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. COOK, DONNA, , ,
 Mailing Address 15951 W EVANS DR

City SURPRISE	State AZ	Zip Code 85379
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 310.00

Date of Receipt
 06 / 28 / 2019
Transaction ID : SA11AI.5213

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	275.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 15 OF 67
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
UNITED POLICE OFFICERS ASSOCIATION

A. CROSS, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 HARVARD ST
 City RUTLAND State VT Zip Code 05701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST EFFORTS Occupation (for Individual) BEST EFFORTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 26 / 2019
Transaction ID : SA11AI.5056
 Amount of Each Receipt this Period 100.00
 Memo Item

B. DEVANNEY, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 317 HIGHLAND ST
 City MANCHESTER State CT Zip Code 06040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETAIL GROCER Occupation (for Individual) HIGHLAND PARK MARKETS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 05 / 2019
Transaction ID : SA11AI.5058
 Amount of Each Receipt this Period 250.00
 Memo Item

C. DEVANNEY, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 317 HIGHLAND ST
 City MANCHESTER State CT Zip Code 06040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETAIL GROCER Occupation (for Individual) HIGHLAND PARK MARKETS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 26 / 2019
Transaction ID : SA11AI.5059
 Amount of Each Receipt this Period 250.00
 Memo Item

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

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

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

FOR LINE NUMBER: PAGE 16 OF 67
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
UNITED POLICE OFFICERS ASSOCIATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. DIAZ, ARMANDO, , ,

Mailing Address 3147 CARLILLE DR

City YORK State PA Zip Code 17408

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2019
Transaction ID : SA11AI.5070

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 4200 KING ARTHUR CT

City BAKERSFIELD State CA Zip Code 93301

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2019
Transaction ID : SA11AI.5245

Amount of Each Receipt this Period
300.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ELMORE, JUDY, , ,

Mailing Address 2637 3RD ST NE

City BIRMINGHAM State AL Zip Code 35215

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2019
Transaction ID : SA11AI.5132

Amount of Each Receipt this Period
105.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 655.00

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

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

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

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. ESPINOZA, JOE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5133 BARCELONA DR

City GARLAND	State TX	Zip Code 75043
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2019

Transaction ID : SA11AI.5162

Amount of Each Receipt this Period
150.00

Memo Item

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

Mailing Address 10700 FINELAND DR NW APT 415

City ALBUQUERQUE	State NM	Zip Code 87114
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2019

Transaction ID : SA11AI.5217

Amount of Each Receipt this Period
100.00

Memo Item

C. FEIST, DONOVAN J, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1202 TROUT DR

City WOODSTOCK	State GA	Zip Code 30189
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		15		2019

Transaction ID : SA11AI.5111

Amount of Each Receipt this Period
250.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. FICHTNER, RHONDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2548 KINGWOOD PIKE
 City MORGANTOWN State WV Zip Code 26508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MYLIN Occupation (for Individual) PHARMASUTICAL PLANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 06 / 23 / 2019
Transaction ID : SA11AI.5093
 Amount of Each Receipt this Period 207.00
 Memo Item

B. GEHRING, EVA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 WALTHAM ST APT 119
 City WEST NEWTON State MA Zip Code 02465
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 23 / 2019
Transaction ID : SA11AI.5052
 Amount of Each Receipt this Period 250.00
 Memo Item

C. GRIEVE, WANDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2456 TREELANE AVE
 City MONROVIA State CA Zip Code 91016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 04 / 15 / 2019
Transaction ID : SA11AI.5240
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	557.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 67
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GRIEVE, WANDA, , ,		Date of Receipt
Mailing Address 2456 TREELANE AVE		<input type="text" value="04"/> / <input type="text" value="20"/> / <input type="text" value="2019"/>
City MONROVIA	State CA	Zip Code 91016
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.5233
Name of Employer (for Individual) Retired		Occupation (for Individual) Retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="275.00"/>	Amount of Each Receipt this Period <input type="text" value="50.00"/>
		<input type="checkbox"/> Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GRIEVE, WANDA, , ,		Date of Receipt
Mailing Address 2456 TREELANE AVE		<input type="text" value="04"/> / <input type="text" value="25"/> / <input type="text" value="2019"/>
City MONROVIA	State CA	Zip Code 91016
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.5239
Name of Employer (for Individual) Retired		Occupation (for Individual) Retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="327.00"/>	Amount of Each Receipt this Period <input type="text" value="52.00"/>
		<input type="checkbox"/> Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GRIEVE, WANDA, , ,		Date of Receipt
Mailing Address 2456 TREELANE AVE		<input type="text" value="06"/> / <input type="text" value="14"/> / <input type="text" value="2019"/>
City MONROVIA	State CA	Zip Code 91016
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.5238
Name of Employer (for Individual) Retired		Occupation (for Individual) Retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="477.00"/>	Amount of Each Receipt this Period <input type="text" value="150.00"/>
		<input type="checkbox"/> Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="252.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. GRIEVE, WANDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2456 TREELANE AVE

City MONROVIA	State CA	Zip Code 91016
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
627.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2019

Transaction ID : SA11AI.5235

Amount of Each Receipt this Period
150.00

Memo Item

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

Mailing Address 2456 TREELANE AVE

City MONROVIA	State CA	Zip Code 91016
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
877.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2019

Transaction ID : SA11AI.5241

Amount of Each Receipt this Period
250.00

Memo Item

C. GRIFFITH, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1178 GRANT ST

City HOLLYWOOD	State FL	Zip Code 33019
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2019

Transaction ID : SA11AI.5119

Amount of Each Receipt this Period
120.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	520.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 OF 67
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)
UNITED POLICE OFFICERS ASSOCIATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. GUIDRY, SYLVIA, , ,

Mailing Address 1018 VENTANA DR

City CORAOPOLIS	State PA	Zip Code 15108
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2019

Transaction ID : SA11AI.5065

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 225 ZABALA RD

City SALINAS	State CA	Zip Code 93908
-----------------	-------------	-------------------

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

Name of Employer (for Individual) roofer	Occupation (for Individual) self employed
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		18		2019

Transaction ID : SA11AI.5247

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 1015 DUNBAR ST

City HOUSTON	State TX	Zip Code 77009
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2019

Transaction ID : SA11AI.5169

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. HERNANDEZ, EDGAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2814 PATRON LOOP
 City LAREDO State TX Zip Code 78045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PASTOR Occupation (for Individual) PASTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt 04 / 24 / 2019
Transaction ID : SA11AI.5178
 Amount of Each Receipt this Period 202.00
 Memo Item

B. HERNANDEZ, MIGUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2141 SANBORN RD
 City YUBA CITY State CA Zip Code 95993
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 19 / 2019
Transaction ID : SA11AI.5271
 Amount of Each Receipt this Period 500.00
 Memo Item

C. HIBBS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7590 HUNTERS WOODS DR
 City ATLANTA State GA Zip Code 30350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST EFFORTS Occupation (for Individual) BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.5112
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	952.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. HICKS, GREG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2518 MUIRLANDS DR

City AUSTIN	State TX	Zip Code 78744
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
202.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		10		2019

Transaction ID : SA11AI.5186

Amount of Each Receipt this Period
202.00

Memo Item

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

Mailing Address 1112 N HOUSTON ST

City ROYSE CITY	State TX	Zip Code 75189
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		19		2019

Transaction ID : SA11AI.5164

Amount of Each Receipt this Period
300.00

Memo Item

C. HUBBARD, LAURA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 903 E HORSESHOE PL

City CHANDLER	State AZ	Zip Code 85249
------------------	-------------	-------------------

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

Name of Employer (for Individual) PA	Occupation (for Individual) urgent care / us army
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2019

Transaction ID : SA11AI.5206

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	752.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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)
UNITED POLICE OFFICERS ASSOCIATION

A. HUBBARD, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 903 E HORSESHOE PL
 City CHANDLER State AZ Zip Code 85249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PA Occupation (for Individual) urgent care / us army
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 23 / 2019
Transaction ID : SA11AI.5207
 Amount of Each Receipt this Period 750.00
 Memo Item

B. HURLEY, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16375 COUNTY ROAD 110
 City CALHAN State CO Zip Code 80808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST EFFORTS Occupation (for Individual) BEST EFFORTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 19 / 2019
Transaction ID : SA11AI.5199
 Amount of Each Receipt this Period 150.00
 Memo Item

C. JOHNSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 S BELT W APT 139
 City BELLEVILLE State IL Zip Code 62220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 06 / 15 / 2019
Transaction ID : SA11AI.5146
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. JOHNSON, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1350 N WELLS ST
 City CHICAGO State IL Zip Code 60610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOFTWARE CONSULTANT Occupation (for Individual) SOFTWARE CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 10 / 2019**
Transaction ID : SA11AI.5144
 Amount of Each Receipt this Period 300.00
 Memo Item

B. JOHNSON, MOLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 FAIRWAY LN
 City PLEASANTON State CA Zip Code 94566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 09 / 2019**
Transaction ID : SA11AI.5214
 Amount of Each Receipt this Period 200.00
 Memo Item

C. JOINER, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2507 RUSSELL PKWY
 City GREAT BEND State KS Zip Code 67530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **06 / 23 / 2019**
Transaction ID : SA11AI.5156
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. KOHR, CHRISTINE M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 789 FAIRWOOD FOREST DR
 City CLEARWATER State FL Zip Code 33759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST EFFORTS Occupation (for Individual) BEST EFFORTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 29 / 2019
Transaction ID : SA11AI.5121
 Amount of Each Receipt this Period 300.00
 Memo Item

B. KRUPLIN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9665 WILSHIRE BLVD
 City BEVERLY HILLS State CA Zip Code 90212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST EFFORTS Occupation (for Individual) BEST EFFORTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 24 / 2019
Transaction ID : SA11AI.5226
 Amount of Each Receipt this Period 500.00
 Memo Item

C. LONGDEN, BLAKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8016 SHINY MEADOW LN
 City CHARLOTTE State NC Zip Code 28215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOLAR ENERGY CONSULTANT Occupation (for Individual) BRIO ENERGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 04 / 19 / 2019
Transaction ID : SA11AI.5099
 Amount of Each Receipt this Period 25.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. LORENTZ, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9189 SW 193RD CIR
 City DUNNELLON State FL Zip Code 34432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 06 / 24 / 2019
Transaction ID : SA11AI.5130
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MADSON, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 163 SALOLI WAY
 City LOUDON State TN Zip Code 37774
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 03 / 2019
Transaction ID : SA11AI.5133
 Amount of Each Receipt this Period 500.00
 Memo Item

C. MARTIN, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9
 City TERRAL State OK Zip Code 73569
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 29 / 2019
Transaction ID : SA11AI.5158
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	785.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. MARTINEZ, CELESTINO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16164 HOPE RD
 City ALPHARETTA State GA Zip Code 30004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST EFFORTS Occupation (for Individual) BEST EFFORTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 24 / 2019
Transaction ID : SA11AI.5108
 Amount of Each Receipt this Period 150.00
 Memo Item

B. MAZZA, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3074 PEACH AVE APT 110
 City CLOVIS State CA Zip Code 93612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST EFFORTS Occupation (for Individual) BEST EFFORTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 28 / 2019
Transaction ID : SA11AI.5246
 Amount of Each Receipt this Period 250.00
 Memo Item

C. MCARDLE, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1615 CONNELLY RD
 City BAYTOWN State TX Zip Code 77521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPERATIONS ASSISTANT Occupation (for Individual) OIL AND GAS INDUSTRY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 02 / 2019
Transaction ID : SA11AI.5176
 Amount of Each Receipt this Period 300.00
 Memo Item

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MEECH, DENNIS, , ,		Date of Receipt
Mailing Address 627 W 18TH ST		<input type="text" value="05"/> / <input type="text" value="04"/> / <input type="text" value="2019"/>
City FORT SCOTT	State KS	Zip Code 66701
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.5155
Name of Employer (for Individual) BEST EFFORTS		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Occupation (for Individual) BEST EFFORTS		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MERRILL, KAREN, , ,		Date of Receipt
Mailing Address 6552 SILVERFOX DR		<input type="text" value="06"/> / <input type="text" value="11"/> / <input type="text" value="2019"/>
City CINCINNATI	State OH	Zip Code 45230
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.5137
Name of Employer (for Individual) RETIRED		Amount of Each Receipt this Period <input type="text" value="300.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MITCHEM, CHARLES, , ,		Date of Receipt
Mailing Address PO BOX 306		<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2019"/>
City HENDERSONVILLE	State NC	Zip Code 28793
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.5105
Name of Employer (for Individual) TRAVEL AGENT		Amount of Each Receipt this Period <input type="text" value="50.00"/>
Occupation (for Individual) SELF EMPLOYED		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="225.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="600.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

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

Mailing Address **PO BOX 306**

City HENDERSONVILLE	State NC	Zip Code 28793
-------------------------------	--------------------	--------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
06 / 24 / 2019

Transaction ID : SA11AI.5106

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address **500 JOHNSON RD**

City SUWANEE	State GA	Zip Code 30024
------------------------	--------------------	--------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
01 / 26 / 2019

Transaction ID : SA11AI.5109

Amount of Each Receipt this Period
300.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MOMMAERTS, LEE, , ,

Mailing Address **3638 E MARTIN AVE**

City CUDAHY	State WI	Zip Code 53110
-----------------------	--------------------	--------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
04 / 30 / 2019

Transaction ID : SA11AI.5140

Amount of Each Receipt this Period
150.00

Memo Item

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. MURRAY, CECIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4821 PARKGLEN AVE

City VIEW PARK	State CA	Zip Code 90043
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2019

Transaction ID : SA11AI.5225

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 801 24TH ST

City SAN LEON	State TX	Zip Code 77539
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2019

Transaction ID : SA11AI.5177

Amount of Each Receipt this Period
375.00

Memo Item

C. NUNN, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32 TENNESSEE ST

City HONAKER	State VA	Zip Code 24260
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
515.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2019

Transaction ID : SA11AI.5086

Amount of Each Receipt this Period
515.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1090.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. O DONNELL, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4100 DANCING CLOUD CT UNIT 286

City DESTIN	State FL	Zip Code 32541
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2019

Transaction ID : SA11AI.5115

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 486 SHERMAN WAY

City DECATUR	State GA	Zip Code 30033
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2019

Transaction ID : SA11AI.5110

Amount of Each Receipt this Period
300.00

Memo Item

C. PARKER, BILLIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 128

City SUNFLOWER	State MS	Zip Code 38778
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2019

Transaction ID : SA11AI.5134

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	575.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. PATTERSON, AMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11684 CAMP JONES CT

City BRISTOW	State VA	Zip Code 20136
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2019

Transaction ID : SA11AI.5072

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 157 N PROSPECT AVE

City BERGENFIELD	State NJ	Zip Code 07621
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2019

Transaction ID : SA11AI.5062

Amount of Each Receipt this Period
300.00

Memo Item

C. PETROCELLI, KYLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 157 N PROSPECT AVE

City BERGENFIELD	State NJ	Zip Code 07621
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2019

Transaction ID : SA11AI.5061

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. PHILLIPS, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4654 E STATE ROAD 64 PMB 104

City BRADENTON	State FL	Zip Code 34208
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2019
Transaction ID : SA11AI.5123

Amount of Each Receipt this Period
 215.00

Memo Item

B. PILCH, ERICA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2506 6TH AVE

City GREELEY	State CO	Zip Code 80631
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2019
Transaction ID : SA11AI.5196

Amount of Each Receipt this Period
 200.00

Memo Item

C. PLAFCAN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10625 W BARNSDALE CT

City BOISE	State ID	Zip Code 83713
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 23 / 2019
Transaction ID : SA11AI.5203

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	665.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 35 OF 67
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. RHOADES, BRIAN L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49W020 SCOTT RD
 City BIG ROCK State IL Zip Code 60511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COCA COLA CO Occupation (for Individual) retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 13 / 2019
Transaction ID : SA11AI.5143
 Amount of Each Receipt this Period 400.00
 Memo Item

B. RHOADES, BRIAN L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49W020 SCOTT RD
 City BIG ROCK State IL Zip Code 60511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COCA COLA CO Occupation (for Individual) retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 14 / 2019
Transaction ID : SA11AI.5142
 Amount of Each Receipt this Period 200.00
 Memo Item

C. ROBERTSON, CAROLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37810 GALLERIA OAKS LN
 City MAGNOLIA State TX Zip Code 77354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST EFFORTS Occupation (for Individual) BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 04 / 29 / 2019
Transaction ID : SA11AI.5173
 Amount of Each Receipt this Period 315.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. ROBLES, MELISSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4051

City SANTA FE SPRINGS	State CA	Zip Code 90670
--------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
302.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 07 / 2019

Transaction ID : SA11AI.5231

Amount of Each Receipt this Period
 302.00

Memo Item

B. SAMUEL, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 441 JERSEY ST

City SAN FRANCISCO	State CA	Zip Code 94114
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) SENIOR VP OPERATION	Occupation (for Individual) GILLEAD SCIENCES
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 16 / 2019

Transaction ID : SA11AI.5253

Amount of Each Receipt this Period
 300.00

Memo Item

C. SANCHEZ, KANAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9107 BLUEGRASS DR

City AUSTIN	State TX	Zip Code 78759
----------------	-------------	-------------------

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

Name of Employer (for Individual) vintage	Occupation (for Individual) self employed
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2019

Transaction ID : SA11AI.5188

Amount of Each Receipt this Period
 25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	627.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. SANDBOTHE, ROBIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17753 MAPLEWOOD CIR

City ROCKY MOUNT	State MO	Zip Code 65072
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		14		2019

Transaction ID : SA11AI.5150

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 21543 ELM HURST LN

City KATY	State TX	Zip Code 77450
--------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2019

Transaction ID : SA11AI.5174

Amount of Each Receipt this Period
200.00

Memo Item

C. SAUCEDO, GERARDO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 877 AVENIDA LINARES

City EAGLE PASS	State TX	Zip Code 78852
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		22		2019

Transaction ID : SA11AI.5190

Amount of Each Receipt this Period
250.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. SCHMITT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4050 S HOWICK ST STE E1
 City MILLCREEK State UT Zip Code 84107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST EFFORTS Occupation (for Individual) BEST EFFORTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 08 / 2019
Transaction ID : SA11AI.5204
 Amount of Each Receipt this Period 300.00
 Memo Item

B. SCHMITT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4050 S HOWICK ST STE E1
 City MILLCREEK State UT Zip Code 84107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST EFFORTS Occupation (for Individual) BEST EFFORTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 20 / 2019
Transaction ID : SA11AI.5205
 Amount of Each Receipt this Period 300.00
 Memo Item

C. SCHURTZ, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5090 N VALLEY DR
 City LAS CRUCES State NM Zip Code 88007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 20 / 2019
Transaction ID : SA11AI.5219
 Amount of Each Receipt this Period 100.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 39 OF 67
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. SCHURTZ, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5090 N VALLEY DR
 City LAS CRUCES State NM Zip Code 88007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 20 / 2019
Transaction ID : SA11AI.5220
 Amount of Each Receipt this Period 25.00
 Memo Item

B. SHARP, JESSICA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 ODD RD
 City ODD State WV Zip Code 25902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NURSE Occupation (for Individual) NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 16 / 2019
Transaction ID : SA11AI.5092
 Amount of Each Receipt this Period 75.00
 Memo Item

C. SHELLEY, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1502 LIMEKILN PIKE
 City DRESHER State PA Zip Code 19025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST EFFORTS Occupation (for Individual) BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 01 / 24 / 2019
Transaction ID : SA11AI.5071
 Amount of Each Receipt this Period 225.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 40 OF 67
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

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

Mailing Address 104 VILLA WAY

City CLINTON	State MS	Zip Code 39056
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2019

Transaction ID : SA11AI.5135

Amount of Each Receipt this Period
20.00

Memo Item

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

Mailing Address 6 SAINT ANDREWS DR

City BEAVER FALLS	State PA	Zip Code 15010
----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2019

Transaction ID : SA11AI.5064

Amount of Each Receipt this Period
105.00

Memo Item

C. SNYDER, ADAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 CREEKSIDE WAY

City MILL VALLEY	State CA	Zip Code 94941
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2019

Transaction ID : SA11AI.5263

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 41 OF 67
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. SNYDER, ADAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 CREEKSIDAY WAY

City MILL VALLEY	State CA	Zip Code 94941
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		09		2019

Transaction ID : SA11AI.5262

Amount of Each Receipt this Period
150.00

Memo Item

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

Mailing Address 186 ARANDALE ST

City BEDFORD	State PA	Zip Code 15522
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2019

Transaction ID : SA11AI.5066

Amount of Each Receipt this Period
400.00

Memo Item

C. STEWART, SARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8104 PINTO PATH

City AUSTIN	State TX	Zip Code 78736
----------------	-------------	-------------------

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

Name of Employer (for Individual) unemployed	Occupation (for Individual) Epic health services
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2019

Transaction ID : SA11AI.5185

Amount of Each Receipt this Period
110.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	660.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

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

Mailing Address 503 BANKS LN

City NEWPORT	State NC	Zip Code 28570
-----------------	-------------	-------------------

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

Name of Employer (for Individual) GENERAL CONTRACTOR OWNS BUSINESS	Occupation (for Individual) SELF EMPLOYED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2019

Transaction ID : SA11AI.5100

Amount of Each Receipt this Period
150.00

Memo Item

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

Mailing Address 15020 5TH AVE SW

City BURIEN	State WA	Zip Code 98166
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		07		2019

Transaction ID : SA11AI.5278

Amount of Each Receipt this Period
50.00

Memo Item

C. THOMPSON, JANICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 160 S MAIN ST

City RUTHERFORDTON	State NC	Zip Code 28139
-----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		25		2019

Transaction ID : SA11AI.5094

Amount of Each Receipt this Period
100.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. TREESE, WILLIAM SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 HILLSIDE DR
 City BUFFALO State WY Zip Code 82834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST EFFORTS Occupation (for Individual) BEST EFFORTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 25 / 2019**
Transaction ID : SA11AI.5202
 Amount of Each Receipt this Period 300.00
 Memo Item

B. VEENSTRA, GAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3037 HAZELTON ST
 City FALLS CHURCH State VA Zip Code 22044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST EFFORTS Occupation (for Individual) BEST EFFORTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 04 / 2019**
Transaction ID : SA11AI.5085
 Amount of Each Receipt this Period 80.00
 Memo Item

C. VEENSTRA, GAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3037 HAZELTON ST
 City FALLS CHURCH State VA Zip Code 22044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST EFFORTS Occupation (for Individual) BEST EFFORTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt **05 / 06 / 2019**
Transaction ID : SA11AI.5080
 Amount of Each Receipt this Period 45.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	425.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. VEENSTRA, GAIL, , ,		Date of Receipt MM / DD / YYYY 05 / 21 / 2019 Transaction ID : SA11AI.5077
Mailing Address 3037 HAZELTON ST		Amount of Each Receipt this Period 30.00
City FALLS CHURCH	State VA	Zip Code 22044
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) BEST EFFORTS	Occupation (for Individual) BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. VEENSTRA, GAIL, , ,		Date of Receipt MM / DD / YYYY 06 / 10 / 2019 Transaction ID : SA11AI.5079
Mailing Address 3037 HAZELTON ST		Amount of Each Receipt this Period 40.00
City FALLS CHURCH	State VA	Zip Code 22044
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) BEST EFFORTS	Occupation (for Individual) BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. VEENSTRA, GAIL, , ,		Date of Receipt MM / DD / YYYY 06 / 23 / 2019 Transaction ID : SA11AI.5083
Mailing Address 3037 HAZELTON ST		Amount of Each Receipt this Period 40.00
City FALLS CHURCH	State VA	Zip Code 22044
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) BEST EFFORTS	Occupation (for Individual) BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 405.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. WESTERMAN, ROBERT A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 LEISURE LAKE DR APT D06
 City WARNER ROBINS State GA Zip Code 31088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST EFFORTS Occupation (for Individual) BEST EFFORTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 12 / 2019
Transaction ID : SA11AI.5114
 Amount of Each Receipt this Period 150.00
 Memo Item

B. WIGGINS, REBEKAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1646 LINCOLN SMITH RD
 City ROUND MOUNTAIN State TX Zip Code 78663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST EFFORTS Occupation (for Individual) BEST EFFORTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 01 / 2019
Transaction ID : SA11AI.5183
 Amount of Each Receipt this Period 200.00
 Memo Item

C. YATES, JO ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 840
 City ARTESIA State NM Zip Code 88211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 05 / 2019
Transaction ID : SA11AI.5222
 Amount of Each Receipt this Period 400.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 67
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
UNITED POLICE OFFICERS ASSOCIATION

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZILKA, MERRI, , ,

Mailing Address PO BOX 23715

City WACO	State TX	Zip Code 76702
--------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2019

Transaction ID : SA11A1.5168

Amount of Each Receipt this Period
300.00

Memo Item

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

Mailing Address PO BOX 23715

City WACO	State TX	Zip Code 76702
--------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2019

Transaction ID : SA11A1.5167

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	26096.00

**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

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)
UNITED POLICE OFFICERS ASSOCIATION

Full Name (Last, First, Middle Initial)

A. Action Committee Marketing LLC

Mailing Address 698 Old Commons Dr

City Greenwood State IN Zip Code 46142

Purpose of Disbursement Donor Outreach

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4762
Amount of Each Disbursement this Period
29998.64

Memo Item

Full Name (Last, First, Middle Initial)

B. Action Committee Marketing LLC

Mailing Address 698 Old Commons Dr

City Greenwood State IN Zip Code 46142

Purpose of Disbursement Donor Outreach

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4766
Amount of Each Disbursement this Period
7728.14

Memo Item

Full Name (Last, First, Middle Initial)

C. Action Committee Marketing LLC

Mailing Address 698 Old Commons Dr

City Greenwood State IN Zip Code 46142

Purpose of Disbursement Donor Outreach

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4770
Amount of Each Disbursement this Period
8286.75

Memo Item

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

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

46013.53

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

Full Name (Last, First, Middle Initial) A. Action Committee Marketing LLC		Date of Disbursement MM / DD / YYYY 04 / 30 / 2019	
Mailing Address 698 Old Commons Dr		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4774 Amount of Each Disbursement this Period [REDACTED] 13229.81	
City Greenwood	State IN	Zip Code 46142	Category/ Type [REDACTED]
Purpose of Disbursement Donor Outreach		Candidate Name	
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. Action Committee Marketing LLC		Date of Disbursement MM / DD / YYYY 05 / 31 / 2019	
Mailing Address 698 Old Commons Dr		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4780 Amount of Each Disbursement this Period [REDACTED] 33147.48	
City Greenwood	State IN	Zip Code 46142	Category/ Type [REDACTED]
Purpose of Disbursement Donor Outreach		Candidate Name	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:			

Full Name (Last, First, Middle Initial) C. Action Committee Marketing LLC		Date of Disbursement MM / DD / YYYY 06 / 30 / 2019	
Mailing Address 698 Old Commons Dr		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4785 Amount of Each Disbursement this Period [REDACTED] 32590.70	
City Greenwood	State IN	Zip Code 46142	Category/ Type [REDACTED]
Purpose of Disbursement Donor Outreach		Candidate Name	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 78967.99
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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)
UNITED POLICE OFFICERS ASSOCIATION

Full Name (Last, First, Middle Initial)

A. GSI, INC

Mailing Address 6655 Chicago Rd, Suite 9

City Warren State MI Zip Code 48092

Purpose of Disbursement
Donor Outreach

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 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4763
Amount of Each Disbursement this Period
17357.84

Memo Item

Full Name (Last, First, Middle Initial)

B. GSI, INC

Mailing Address 6655 Chicago Rd, Suite 9

City Warren State MI Zip Code 48092

Purpose of Disbursement
Donor Outreach

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4767
Amount of Each Disbursement this Period
10720.88

Memo Item

Full Name (Last, First, Middle Initial)

C. GSI, INC

Mailing Address 6655 Chicago Rd, Suite 9

City Warren State MI Zip Code 48092

Purpose of Disbursement
Donor Outreach

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4771
Amount of Each Disbursement this Period
14273.08

Memo Item

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

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

42351.80

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

Full Name (Last, First, Middle Initial)

A. GSI, INC

Mailing Address 6655 Chicago Rd, Suite 9

City Warren State MI Zip Code 48092

Purpose of Disbursement
Donor Outreach

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2019

FEC Identification Number

C
Transaction ID : **SB21B.4775**
Amount of Each Disbursement this Period
25480.53

Memo Item

Full Name (Last, First, Middle Initial)

B. GSI, INC

Mailing Address 6655 Chicago Rd, Suite 9

City Warren State MI Zip Code 48092

Purpose of Disbursement
Donor Outreach

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2019

FEC Identification Number

C
Transaction ID : **SB21B.4781**
Amount of Each Disbursement this Period
24729.08

Memo Item

Full Name (Last, First, Middle Initial)

C. GSI, INC

Mailing Address 6655 Chicago Rd, Suite 9

City Warren State MI Zip Code 48092

Purpose of Disbursement
Donor Outreach

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2019

FEC Identification Number

C
Transaction ID : **SB21B.4786**
Amount of Each Disbursement this Period
15219.13

Memo Item

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

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

65428.74

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

Full Name (Last, First, Middle Initial)

A. MARKET PROCESS GROUP

Mailing Address 1250 Connecticut Ave, NW, Suite 20

City Washington State DC Zip Code 20036

Purpose of Disbursement Donor Outreach

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 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4765
Amount of Each Disbursement this Period
47801.62

Memo Item

Full Name (Last, First, Middle Initial)

B. MARKET PROCESS GROUP

Mailing Address 1250 Connecticut Ave, NW, Suite 20

City Washington State DC Zip Code 20036

Purpose of Disbursement Donor Outreach

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4769
Amount of Each Disbursement this Period
30136.56

Memo Item

Full Name (Last, First, Middle Initial)

C. MARKET PROCESS GROUP

Mailing Address 1250 Connecticut Ave, NW, Suite 20

City Washington State DC Zip Code 20036

Purpose of Disbursement Donor Outreach

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4773
Amount of Each Disbursement this Period
32140.47

Memo Item

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

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

110078.65

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

Full Name (Last, First, Middle Initial)

A. MARKET PROCESS GROUP

Mailing Address 1250 Connecticut Ave, NW, Suite 20

City Washington State DC Zip Code 20036

Purpose of Disbursement Donor Outreach

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4779
 Amount of Each Disbursement this Period
 42754.21

Memo Item

Full Name (Last, First, Middle Initial)

B. MARKET PROCESS GROUP

Mailing Address 1250 Connecticut Ave, NW, Suite 20

City Washington State DC Zip Code 20036

Purpose of Disbursement Donor Outreach

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4784
 Amount of Each Disbursement this Period
 158286.81

Memo Item

Full Name (Last, First, Middle Initial)

C. MARKET PROCESS GROUP

Mailing Address 1250 Connecticut Ave, NW, Suite 20

City Washington State DC Zip Code 20036

Purpose of Disbursement Donor Outreach

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4789
 Amount of Each Disbursement this Period
 57639.19

Memo Item

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

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

258680.21

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

Full Name (Last, First, Middle Initial)

A. New Level Productions Inc

Mailing Address 1717 20th Street, Suite 101

City
Vero Beach

State
FL

Zip Code
32960

Purpose of Disbursement
Donor Outreach

Candidate Name

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				3	0		2	0	1	9		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4777

Amount of Each Disbursement this Period

[REDACTED] 2096.25

Memo Item

Full Name (Last, First, Middle Initial)

B. New Level Productions Inc

Mailing Address 1717 20th Street, Suite 101

City
Vero Beach

State
FL

Zip Code
32960

Purpose of Disbursement
Donor Outreach

Candidate Name

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				3	1		2	0	1	9		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4782

Amount of Each Disbursement this Period

[REDACTED] 4357.50

Memo Item

Full Name (Last, First, Middle Initial)

C. New Level Productions Inc

Mailing Address 1717 20th Street, Suite 101

City
Vero Beach

State
FL

Zip Code
32960

Purpose of Disbursement
Donor Outreach

Candidate Name

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6				3	0		2	0	1	9		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4787

Amount of Each Disbursement this Period

[REDACTED] 2055.75

Memo Item

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

[REDACTED] 8509.50

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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)
UNITED POLICE OFFICERS ASSOCIATION

Full Name (Last, First, Middle Initial)

A. Politicause LLC

Mailing Address 204 W. Spear St #3719

City Carson City State NV Zip Code 89703

Purpose of Disbursement Donor Outreach

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 / 2019

FEC Identification Number

C

Transaction ID : SB21B.4764

Amount of Each Disbursement this Period

436403.58

Memo Item

Full Name (Last, First, Middle Initial)

B. Politicause LLC

Mailing Address 204 W. Spear St #3719

City Carson City State NV Zip Code 89703

Purpose of Disbursement Donor Outreach

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2019

FEC Identification Number

C

Transaction ID : SB21B.4768

Amount of Each Disbursement this Period

425029.63

Memo Item

Full Name (Last, First, Middle Initial)

C. Politicause LLC

Mailing Address 204 W. Spear St #3719

City Carson City State NV Zip Code 89703

Purpose of Disbursement Donor Outreach

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2019

FEC Identification Number

C

Transaction ID : SB21B.4772

Amount of Each Disbursement this Period

374633.35

Memo Item

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

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

1236066.56

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. Politicause LLC

Full Name (Last, First, Middle Initial)

Mailing Address 204 W. Spear St #3719

City Carson City State NV Zip Code 89703

Purpose of Disbursement Donor Outreach

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 30 / 2019

FEC Identification Number: C

Transaction ID : SB21B.4778

Amount of Each Disbursement this Period: 229925.29

Memo Item

B. Politicause LLC

Full Name (Last, First, Middle Initial)

Mailing Address 204 W. Spear St #3719

City Carson City State NV Zip Code 89703

Purpose of Disbursement Donor Outreach

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 31 / 2019

FEC Identification Number: C

Transaction ID : SB21B.4783

Amount of Each Disbursement this Period: 119415.65

Memo Item

C. Politicause LLC

Full Name (Last, First, Middle Initial)

Mailing Address 204 W. Spear St #3719

City Carson City State NV Zip Code 89703

Purpose of Disbursement Donor Outreach

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 30 / 2019

FEC Identification Number: C

Transaction ID : SB21B.4788

Amount of Each Disbursement this Period: 117450.79

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 466791.73

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION

A. Regus

Full Name (Last, First, Middle Initial)

Mailing Address 9711 Washingtonian Blvd

City Gaithersburg State MD Zip Code 20878

Purpose of Disbursement Rent

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 29 / 2019

FEC Identification Number: C

Transaction ID : SB21B.4808

Amount of Each Disbursement this Period: 49.00

Memo Item

B. Regus

Full Name (Last, First, Middle Initial)

Mailing Address 9711 Washingtonian Blvd

City Gaithersburg State MD Zip Code 20878

Purpose of Disbursement Rent

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 01 / 2019

FEC Identification Number: C

Transaction ID : SB21B.4810

Amount of Each Disbursement this Period: 49.00

Memo Item

C. Regus

Full Name (Last, First, Middle Initial)

Mailing Address 9711 Washingtonian Blvd

City Gaithersburg State MD Zip Code 20878

Purpose of Disbursement Rent

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 14 / 2019

FEC Identification Number: C

Transaction ID : SB21B.4813

Amount of Each Disbursement this Period: 49.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 147.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)
UNITED POLICE OFFICERS ASSOCIATION

Full Name (Last, First, Middle Initial)

A. TAMPA MEDIA

Mailing Address 7320 E Fletcher Ave

City Tampa State FL Zip Code 33637

Purpose of Disbursement
Media Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 04 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4791
Amount of Each Disbursement this Period
15000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TAMPA MEDIA

Mailing Address 7320 E Fletcher Ave

City Tampa State FL Zip Code 33637

Purpose of Disbursement
Media Consulting

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 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4792
Amount of Each Disbursement this Period
12000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TAMPA MEDIA

Mailing Address 7320 E Fletcher Ave

City Tampa State FL Zip Code 33637

Purpose of Disbursement
Media Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 18 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4793
Amount of Each Disbursement this Period
12000.00

Memo Item

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

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

39000.00

**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

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)
UNITED POLICE OFFICERS ASSOCIATION

Full Name (Last, First, Middle Initial)

A. TAMPA MEDIA

Mailing Address 7320 E Fletcher Ave

City Tampa State FL Zip Code 33637

Purpose of Disbursement
Media Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4795
Amount of Each Disbursement this Period
14000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TAMPA MEDIA

Mailing Address 7320 E Fletcher Ave

City Tampa State FL Zip Code 33637

Purpose of Disbursement
Media Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4796
Amount of Each Disbursement this Period
10500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TAMPA MEDIA

Mailing Address 7320 E Fletcher Ave

City Tampa State FL Zip Code 33637

Purpose of Disbursement
Media Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 08 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4798
Amount of Each Disbursement this Period
11200.00

Memo Item

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

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

35700.00

**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

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)
UNITED POLICE OFFICERS ASSOCIATION

Full Name (Last, First, Middle Initial)

A. TAMPA MEDIA

Mailing Address 7320 E Fletcher Ave

City
Tampa

State
FL

Zip Code
33637

Purpose of Disbursement
Media Consulting

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.4799
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. TAMPA MEDIA

Mailing Address 7320 E Fletcher Ave

City
Tampa

State
FL

Zip Code
33637

Purpose of Disbursement
Media Consulting

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.4801
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. TAMPA MEDIA

Mailing Address 7320 E Fletcher Ave

City
Tampa

State
FL

Zip Code
33637

Purpose of Disbursement
Media Consulting

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.4802
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

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)
UNITED POLICE OFFICERS ASSOCIATION

Full Name (Last, First, Middle Initial)

A. TAMPA MEDIA

Mailing Address 7320 E Fletcher Ave

City
Tampa

State
FL

Zip Code
33637

Purpose of Disbursement
Media Consulting

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	1	9

FEC Identification Number

C []

Transaction ID : SB21B.4804

Amount of Each Disbursement this Period

[] 14000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TAMPA MEDIA

Mailing Address 7320 E Fletcher Ave

City
Tampa

State
FL

Zip Code
33637

Purpose of Disbursement
Media Consulting

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	1	9

FEC Identification Number

C []

Transaction ID : SB21B.4805

Amount of Each Disbursement this Period

[] 14000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TAMPA MEDIA

Mailing Address 7320 E Fletcher Ave

City
Tampa

State
FL

Zip Code
33637

Purpose of Disbursement
Media Consulting

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	2		2	0	1	9

FEC Identification Number

C []

Transaction ID : SB21B.4806

Amount of Each Disbursement this Period

[] 12000.00

Memo Item

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

[] 40000.00

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

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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)
UNITED POLICE OFFICERS ASSOCIATION

Full Name (Last, First, Middle Initial)

A. TAMPA MEDIA

Mailing Address 7320 E Fletcher Ave

City
Tampa

State
FL

Zip Code
33637

Purpose of Disbursement
Media Consulting

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	29	/	2019

FEC Identification Number

C []
Transaction ID : SB21B.4807
Amount of Each Disbursement this Period
[] 11000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TAMPA MEDIA

Mailing Address 7320 E Fletcher Ave

City
Tampa

State
FL

Zip Code
33637

Purpose of Disbursement
Media Consulting

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	05	/	2019

FEC Identification Number

C []
Transaction ID : SB21B.4809
Amount of Each Disbursement this Period
[] 11000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TAMPA MEDIA

Mailing Address 7320 E Fletcher Ave

City
Tampa

State
FL

Zip Code
33637

Purpose of Disbursement
Media Consulting

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	17	/	2019

FEC Identification Number

C []
Transaction ID : SB21B.4811
Amount of Each Disbursement this Period
[] 10200.00

Memo Item

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

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

[] 32200.00

[]

**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

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)
UNITED POLICE OFFICERS ASSOCIATION

Full Name (Last, First, Middle Initial)

A. TAMPA MEDIA

Mailing Address 7320 E Fletcher Ave

City Tampa State FL Zip Code 33637

Purpose of Disbursement
Media Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 24 / 2019

FEC Identification Number

C

Transaction ID : SB21B.4812
Amount of Each Disbursement this Period

10600.00

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

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)..... ▶

10600.00

2508535.71

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNITED POLICE OFFICERS ASSOCIATION
FEC IDENTIFICATION NUMBER C C00664938

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

Full Name of Payee TAMPA MEDIA
Mailing Address 7320 E Fletcher Ave
City Tampa State FL Zip Code 33637
Purpose of Expenditure ADVERTISING - INTERNET/EMAIL
Category/Type 004

Date of Public Distribution/Dissemination 04/12/2019
Amount 6000.00
Transaction ID : SE.5284
Date of Disbursement or Obligation 04/12/2019

Name of Federal Candidate: COLLINS, DOUG, ,
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 6000.00

Office Sought: House District: 08 State: GA
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee TAMPA MEDIA
Mailing Address 7320 E Fletcher Ave
City Tampa State FL Zip Code 33637
Purpose of Expenditure ADVERTISING - INTERNET/EMAIL
Category/Type 004

Date of Public Distribution/Dissemination 04/19/2019
Amount 7200.00
Transaction ID : SE.5286
Date of Disbursement or Obligation 04/19/2019

Name of Federal Candidate: DEMINGS, VALDEZ VAL, ,
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 7200.00

Office Sought: House District: 10 State: FL
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 13200.00
(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.

Bass, Zachary, ,
Signature

[Electronically Filed]

Date 07/13/2019

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNITED POLICE OFFICERS ASSOCIATION
FEC IDENTIFICATION NUMBER C C00664938

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

Full Name of Payee TAMPA MEDIA
Mailing Address 7320 E Fletcher Ave
City Tampa State FL Zip Code 33637
Purpose of Expenditure ADVERTISING - INTERNET/EMAIL
Category/Type 004
Date of Public Distribution/Dissemination 04/26/2019
Amount 7000.00
Transaction ID : SE.5287
Date of Disbursement or Obligation 04/26/2019

Name of Federal Candidate: FITZPATRICK, BRIAN, , ,
Support Oppose
Office Sought: House District: 01
President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 7000.00
Disbursement For: Primary General 2020
Other (specify)

Full Name of Payee TAMPA MEDIA
Mailing Address 7320 E Fletcher Ave
City Tampa State FL Zip Code 33637
Purpose of Expenditure ADVERTISING - INTERNET/EMAIL
Category/Type 004
Date of Public Distribution/Dissemination 05/03/2019
Amount 8400.00
Transaction ID : SE.5290
Date of Disbursement or Obligation 05/03/2019

Name of Federal Candidate: KING, PETE, , ,
Support Oppose
Office Sought: House District: 02
President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought 8400.00
Disbursement For: Primary General 2020
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 15400.00
(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.

Bass, Zachary, , , [Electronically Filed] Date 07/13/2019
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION
FEC IDENTIFICATION NUMBER
C C00664938

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

Full Name of Payee TAMPA MEDIA
Mailing Address 7320 E Fletcher Ave
City Tampa State FL Zip Code 33637
Purpose of Expenditure ADVERTISING - INTERNET/EMAIL
Category/Type 004
Date of Public Distribution/Dissemination 05/10/2019
Amount 7100.00
Transaction ID : SE.5292
Date of Disbursement or Obligation 05/10/2019

Name of Federal Candidate: VISLOSKY, PETER, ,
Support Oppose
Office Sought: House Senate State: IN
District: 01
Calendar Year-To-Date Per Election for Office Sought 7100.00
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee TAMPA MEDIA
Mailing Address 7320 E Fletcher Ave
City Tampa State FL Zip Code 33637
Purpose of Expenditure ADVERTISING - INTERNET/EMAIL
Category/Type 004
Date of Public Distribution/Dissemination 06/03/2019
Amount 8000.00
Transaction ID : SE.5294
Date of Disbursement or Obligation 06/03/2019

Name of Federal Candidate: RUTHERFORD, JOHN, ,
Support Oppose
Office Sought: House Senate State: FL
District: 04
Calendar Year-To-Date Per Election for Office Sought 8000.00
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 15100.00
(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.

Bass, Zachary, , [Electronically Filed] Date 07/13/2019
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
UNITED POLICE OFFICERS ASSOCIATION
FEC IDENTIFICATION NUMBER
C C00664938

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

Full Name of Payee TAMPA MEDIA
Mailing Address 7320 E Fletcher Ave
City Tampa State FL Zip Code 33637
Purpose of Expenditure ADVERTISING - INTERNET/EMAIL
Category/Type 004
Date of Public Distribution/Dissemination 06/07/2019
Amount 8600.00
Transaction ID : SE.5295
Date of Disbursement or Obligation 06/07/2019

Name of Federal Candidate: COOK, PAUL, , ,
Support Oppose
Office Sought: House District: 08
President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 8600.00
Disbursement For: Primary General
Other (specify)

Full Name of Payee TAMPA MEDIA
Mailing Address 7320 E Fletcher Ave
City Tampa State FL Zip Code 33637
Purpose of Expenditure ADVERTISING - INTERNET/EMAIL
Category/Type 004
Date of Public Distribution/Dissemination 06/14/2019
Amount 5700.00
Transaction ID : SE.5297
Date of Disbursement or Obligation 06/14/2019

Name of Federal Candidate: HILL, KATIE, , ,
Support Oppose
Office Sought: House District: 25
President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 5700.00
Disbursement For: Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 14300.00
(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.

Bass, Zachary, , , [Electronically Filed]
Signature Date 07/13/2019

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNITED POLICE OFFICERS ASSOCIATION
FEC IDENTIFICATION NUMBER C C00664938

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

Full Name of Payee TAMPA MEDIA
Mailing Address 7320 E Fletcher Ave
City Tampa State FL Zip Code 33637
Purpose of Expenditure ADVERTISING - INTERNET/EMAIL
Category/Type 004

Date of Public Distribution/Dissemination 06/21/2019
Amount 5500.00
Transaction ID : SE.5299
Date of Disbursement or Obligation 06/21/2019

Name of Federal Candidate: KHANNA, RO, ,
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 5500.00

Office Sought: House District: 17
President Senate State: CA
Disbursement For: Primary General 2020
Other (specify)

Full Name of Payee TAMPA MEDIA
Mailing Address 7320 E Fletcher Ave
City Tampa State FL Zip Code 33637
Purpose of Expenditure ADVERTISING - INTERNET/EMAIL
Category/Type 004

Date of Public Distribution/Dissemination 06/28/2019
Amount 5500.00
Transaction ID : SE.5301
Date of Disbursement or Obligation 06/28/2019

Name of Federal Candidate: TIPTON, SCOTT, ,
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 5500.00

Office Sought: House District: 03
President Senate State: CO
Disbursement For: Primary General 2020
Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 11000.00, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 69000.00

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.

Bass, Zachary, ,

[Electronically Filed]

Date 07/13/2019

Signature