

**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

MADISON PROJECT INC.

ADDRESS (number and street)

PO BOX 655

Check if different
than previously
reported. (ACC)

ALEDO

TX

76008

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00298000

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



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 / D D / Y Y Y Y Y Y

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

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

in the
State of

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

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

General (30G)



Runoff (30R)



Special (30S)

Election on

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

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

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

in the
State of

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

5. Covering Period

M M / D D / Y Y Y Y Y Y
04 01 2018

through

M M / D D / Y Y Y Y Y Y
04 30 2018M M / D D / Y Y Y Y Y Y
04 30 2018M M / D D / Y Y Y Y Y Y
04 30 2018

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

KILGORE, PAUL, A, ,

Type or Print Name of Treasurer

Signature of Treasurer

KILGORE, PAUL, A, ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
05 18 2018M M / D D / Y Y Y Y Y Y
05 18 2018M M / D D / Y Y Y Y Y Y
05 18 2018

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

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

MADISON PROJECT INC.

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
04		01		2018

To:

M M	/	D D	/	Y Y Y Y Y
04		30		2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div><div>Y Y Y Y Y</div><div>2018</div></div>		<div><div></div><div>267031.16</div></div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div><div></div><div>181613.12</div></div>	
(c) Total Receipts (from Line 19)	<div><div></div><div>21480.26</div></div>	<div><div></div><div>59070.27</div></div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div><div></div><div>203093.38</div></div>	<div><div></div><div>326101.43</div></div>
7. Total Disbursements (from Line 31).....	<div><div></div><div>33038.66</div></div>	<div><div></div><div>156046.71</div></div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<div><div></div><div>170054.72</div></div>	<div><div></div><div>170054.72</div></div>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<div><div></div><div>0.00</div></div>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<div><div></div><div>0.00</div></div>	



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

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

MADISON PROJECT INC.

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	8

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	8

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).....	5915.00	18145.00
(ii) Unitemized	15565.26	40922.05
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	21480.26	59067.05
(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)	21480.26	59067.05
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	3.22
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))	21480.26	59070.27
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	21480.26	59070.27

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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	20831.98	64044.84
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	20831.98	64044.84
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	8030.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	11206.68	83971.87
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)) ..	33038.66	156046.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	33038.66	156046.71

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)	21480.26	59067.05
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21480.26	59067.05
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	20831.98	64044.84
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	3.22
38. Net Operating Expenditures (subtract Line 37 from Line 36)	20831.98	64041.62

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 27
(check only one)

<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
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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)

MADISON PROJECT INC.

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

A. AZEVEDO, KATHRYN, , ,

Mailing Address 1108 VALLEY VIEW DR

City
ENNISState
TXZip Code
75119FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (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
04	25	2018

Transaction ID : SA11AI.390867

Amount of Each Receipt this Period

400.00

☐ Memo Item

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

B. BARRY, THOMAS, C, MR,

Mailing Address 604 MOUNT OLYMPUS BLVD

City

NEW SMYRNA BEACH

State

FL

Zip Code

32168

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M	D D	Y Y Y Y
04	04	2018

Transaction ID : SA11AI.390595

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. BARRY, THOMAS, C, MR,

Mailing Address 604 MOUNT OLYMPUS BLVD

City

NEW SMYRNA BEACH

State

FL

Zip Code

32168

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M	D D	Y Y Y Y
04	30	2018

Transaction ID : SA11AI.391010

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

600.00

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

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

FOR LINE NUMBER: PAGE 7 OF 27
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

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

A. DAVIS, CULLEN, , ,

Mailing Address 5805 N BALLANTRAE DRIVE

City
COLLEYVILLE

State
TX

Zip Code
76034

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GREAT WESTERN DRILLING

Occupation (for Individual)
FOUNDATION PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 19 / 2018

Transaction ID : SA11AI.390752

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. DEMBSKI, RICHARD, D., ,

Mailing Address 3442 PARK RIDGE DR

City
GROVE CITY

State
OH

Zip Code
43123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FAYETTE CO MMORIAL HOSPITAL

Occupation (for Individual)
PHARMACIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 16 / 2018

Transaction ID : SA11AI.390701

Amount of Each Receipt this Period

120.00

☐ Memo Item

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

C. DONIHOO, BILLY, , ,

Mailing Address 2404 DUBLIN RD

City
PLANO

State
TX

Zip Code
75094

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 09 / 2018

Transaction ID : SA11AI.390633

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

720.00

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

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

FOR LINE NUMBER: PAGE 8 OF 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

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

A. FRANTZ, JOHN, , ,

Mailing Address 425 W LESTER AVE

City
CLOVIS

State
CA

Zip Code
93619

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

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 / 16 / 2018

Transaction ID : SA11AI.390686

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

B. GULL, GAYLE, , ,

Mailing Address 3665 ALTAMONT WAY

City
REDWOOD CITY

State
CA

Zip Code
94062

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

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
04 / 25 / 2018

Transaction ID : SA11AI.390878

Amount of Each Receipt this Period

240.00

☐ Memo Item

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

C. HADLEY, CHARLES, A, ,

Mailing Address 4840 THUNDERBIRD DR APT 383

City
BOULDER

State
CO

Zip Code
80303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 30 / 2018

Transaction ID : SA11AI.391021

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

540.00

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 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

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

A. KUBIN, DANIEL, , ,

Mailing Address 1701 BLOUNT ST

City
HOUSTON

State
TX

Zip Code
77008

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 04 / 2018

Transaction ID : SA11AI.390597

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

B. MCDONALD, KAY, , ,

Mailing Address 1898 HENDERSHOT RD

City
PARMA

State
MI

Zip Code
49269

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 25 / 2018

Transaction ID : SA11AI.390815

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. MEISSNER, MIKE, L, MR.,

Mailing Address 2 WEEPING SPRUCE PL

City
THE WOODLANDS

State
TX

Zip Code
77384

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CHEVRON PHILLIPS CHEMICAL CO.

Occupation (for Individual)
FINANCE MGR.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2018

Transaction ID : SA11AI.390986

Amount of Each Receipt this Period

500.00

☐ 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 10 OF 27

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

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

A. PEYTON, WILLIAM, , ,

Mailing Address 9228 E STATE ROAD 42

City
RAGO

State
KS

Zip Code
67142

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 09 / 2018

Transaction ID : SA11AI.390648

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

B. PROBST, EDWARD, , ,

Mailing Address 1920 FRANKLIN ST

City

COLUMBUS

State

IN

Zip Code

47201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 09 / 2018

Transaction ID : SA11AI.390644

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. SHAFER, HENRY, , ,

Mailing Address 15850 NW CENTRAL DR UNIT 262

City

PORTLAND

State

OR

Zip Code

97229

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

259.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 25 / 2018

Transaction ID : SA11AI.390790

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

600.00

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

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

FOR LINE NUMBER: PAGE 11 OF 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

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

A. SIVIERO, MARK, A, MR,

Mailing Address 19035 YAUPON RANCH DR

City
CYPRESSState
TXZip Code
77433FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
CONSTRUCTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 25 / 2018

Transaction ID : SA11AI.390763

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. STEIN, RICHARD, , ,

Mailing Address 3355 ANNANDALE LN STE 4

City
SUWANEEState
GAZip Code
30024FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 04 / 2018

Transaction ID : SA11AI.390591

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

C. WEEKS, ANNIE, , ,

Mailing Address 3411 ROCK LN

City
IRONDALEState
ALZip Code
35210FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 16 / 2018

Transaction ID : SA11AI.390707

Amount of Each Receipt this Period

180.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

830.00

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 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

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

A. WINTER, DONALD, , ,

Mailing Address 7712 APPLE MILL PL

City
LOUISVILLE

State
KY

Zip Code
40228

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 16 / 2018

Transaction ID : SA11AI.390680

Amount of Each Receipt this Period

350.00

☐ Memo Item

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

B. WISE, STEVE, , ,

Mailing Address 6013 GREENLEAF CT

City
BRENTWOOD

State
TN

Zip Code
37027

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AMERICAN AIRLINES

Occupation (for Individual)
PILOT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 06 / 2018

Transaction ID : SA11AI.390604

Amount of Each Receipt this Period

500.00

☐ Memo Item

EM-NICHOLSON-TRANS20180412

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

C. WISE, STEVE, , ,

Mailing Address 6013 GREENLEAF CT

City
BRENTWOOD

State
TN

Zip Code
37027

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AMERICAN AIRLINES

Occupation (for Individual)
PILOT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 06 / 2018

Transaction ID : SA11AI.390602

Amount of Each Receipt this Period

500.00

☐ Memo Item

EM-MCDANIEL-TRANS20180412

SUBTOTAL of Receipts This Page (optional)..... ►

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

1350.00

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

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

FOR LINE NUMBER: PAGE 13 OF 27
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

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

A. WISE, ROBERT, H., , JR.

Mailing Address 2348 RIVER GRAND DR

City
VESTAVIA

State
AL

Zip Code
35243

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 16 / 2018

Transaction ID : SA11AI.390687

Amount of Each Receipt this Period

325.00

☐ Memo Item

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

B.

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

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

C.

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)..... ►

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

325.00

5915.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 27

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

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. ALLEGIANCE DIRECT LLC

Mailing Address 115 N KING ST STE 205

City
LEESBURGState
VAZip Code
20176Purpose of Disbursement
PAC DIRECT MAIL PRODUCTION

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.39052

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AMBASSADOR ACCOUNTS INC.

Mailing Address 7521 PRESIDENTIAL LANE

City
MANASSASState
VAZip Code
20109Purpose of Disbursement
PAC ACCOUNTING SERVICES

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.39073

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address THIRD STREET, SUITE 2B

City
BATON ROUGEState
LAZip Code
70801Purpose of Disbursement
PAC BANK FEES

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			3	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.39062

Amount of Each Disbursement this Period

140.16

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

740.16

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 27

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

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. BANK OF AMERICA

Mailing Address 100 N TRYON ST

City
CHARLOTTEState
NCZip Code
28202Purpose of Disbursement
PAC BANK FEES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.39058

Amount of Each Disbursement this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BANK OF AMERICA

Mailing Address 100 N TRYON ST

City
CHARLOTTEState
NCZip Code
28202Purpose of Disbursement
PAC BANK FEES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.39057

Amount of Each Disbursement this Period

12.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BANK OF AMERICA

Mailing Address 100 N TRYON ST

City
CHARLOTTEState
NCZip Code
28202Purpose of Disbursement
PAC BANK FEES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.39057

Amount of Each Disbursement this Period

12.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

54.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 27

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

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. BANK OF AMERICA

Mailing Address 100 N TRYON ST

City
CHARLOTTEState
NCZip Code
28202Purpose of Disbursement
PAC BANK FEES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.39062

Amount of Each Disbursement this Period

 10.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BANK OF AMERICA

Mailing Address 100 N TRYON ST

City
CHARLOTTEState
NCZip Code
28202Purpose of Disbursement
PAC BANK FEES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				1	0		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.39067

Amount of Each Disbursement this Period

 35.00☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BANK OF AMERICA

Mailing Address 100 N TRYON ST

City
CHARLOTTEState
NCZip Code
28202Purpose of Disbursement
PAC BANK FEES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				2	0		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.39071

Amount of Each Disbursement this Period

 3.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 48.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 27

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

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. BANK OF AMERICA

Mailing Address 100 N TRYON ST

City
CHARLOTTEState
NCZip Code
28202Purpose of Disbursement
PAC BANK FEES

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.39090

Amount of Each Disbursement this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DOUGLAS, KATHY, , ,

Mailing Address 901 MCCLENDON WALKER ROAD

City
ALEDOState
TXZip Code
76008Purpose of Disbursement
PAC ACCOUNTING SERVICES

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.39066

Amount of Each Disbursement this Period

375.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELECTEK

Mailing Address PO BOX 23715

City
CHAGRIN FALLSState
OHZip Code
44023Purpose of Disbursement
PAC SOFTWARE

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.39052

Amount of Each Disbursement this Period

300.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

705.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 27

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

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. MAILCHIMP

Mailing Address 512 MEANS ST NW STE 404

City
ATLANTAState
GAZip Code
30318Purpose of Disbursement
PAC E-MARKETING

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.39067

Amount of Each Disbursement this Period

207.87

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MEDIA TEMPLE

Mailing Address 8520 NATIONAL BLVD BLDG A

City
CULVER CITYState
CAZip Code
90232Purpose of Disbursement
PAC WEB DEVELOPMENT

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.39074

Amount of Each Disbursement this Period

63.96

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PAYCHEX

Mailing Address 911 PANORAMA TRAIL S.

City
ROCHESTERState
NYZip Code
14625Purpose of Disbursement
PAC PAYROLL FEES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.39067

Amount of Each Disbursement this Period

61.34

☐ Memo Item

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

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

333.17

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 27

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

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. PROFESSIONAL DATA SERVICES

Mailing Address 824 S MILLEDGE AVE STE 101

City
ATHENSState
GAZip Code
30605Purpose of Disbursement
PAC COMPLIANCE CONSULTING

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.39066

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RYUN, JIM, , ,

Mailing Address 132 D ST SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
PAC STRATEGY CONSULTING

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.39074

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SARATOGA STRATEGIES LLC

Mailing Address 1550 OLD ANNETTA ROAD

City
ALEDOState
TXZip Code
76008Purpose of Disbursement
PAC STRATEGY CONSULTING

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.39052

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 27

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

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. SHAFER, KRISTOFFER, L., ,Mailing Address 2420 VIA BOLOGNA
APT. 2428City
FORT WORTHState
TXZip Code
76109Purpose of Disbursement
PAC STRATEGY CONSULTING

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	9			2	0	1	8		

FEC Identification Number

C Transaction ID : SB21B.39074

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THE GOBER GROUPMailing Address 2101 CEDAR SPRINGS RD STE 1050
SUITE 1050City
DALLASState
TXZip Code
75201Purpose of Disbursement
PAC LEGAL FEES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	2			2	0	1	8		

FEC Identification Number

C Transaction ID : SB21B.39052

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. THE RICHARD NORMAN COMPANY

Mailing Address 113 EAST MARKET ST. STE. 300

City
LEESBURGState
VAZip Code
20176Purpose of Disbursement
PAC DIRECT MAIL PRODUCTION

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	5			2	0	1	8		

FEC Identification Number

C Transaction ID : SB21B.39058

Amount of Each Disbursement this Period

5726.58

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8226.58

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 27

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

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. THE RICHARD NORMAN COMPANY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		23		2018

Mailing Address 113 EAST MARKET ST. STE. 300

City
LEESBURGState
VAZip Code
20176Purpose of Disbursement
PAC DIRECT MAIL PRODUCTION

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.39075

Amount of Each Disbursement this Period

4565.56

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. VENDYNAMICS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		02		2018

Mailing Address PO BOX 1295

City
HOLLISTERState
CAZip Code
95024Purpose of Disbursement
PAC PRINTING

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.39052

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5065.56

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

20672.47

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 27

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

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. FRIENDS OF CHRIS MCDANIEL

Mailing Address PO BOX 491

City
LAURELState
MSZip Code
39441Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001

Candidate Name

MCDANIEL, CHRISTOPHER, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2018

☒ Primary☐ General☐ Other (specify) ▼

State: MS

District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2			2	0	1	8		

FEC Identification Number

C C00673285**Transaction ID : SB23.390740**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF CHRIS MCDANIEL

Mailing Address PO BOX 491

City
LAURELState
MSZip Code
39441Purpose of Disbursement
EARMARKED BY STEVE WISE ID# 23981

001

Candidate Name

MCDANIEL, CHRISTOPHER, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2018

☒ Primary☐ General☐ Other (specify) ▼

State: MS

District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	6			2	0	1	8		

FEC Identification Number

C C00673285**Transaction ID : SB23.390741**

Amount of Each Disbursement this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. NICHOLSON FOR SENATE

Mailing Address PO BOX 454

City
HARTLANDState
WIZip Code
53029Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001

Candidate Name

NICHOLSON, KEVIN, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2018

☒ Primary☐ General☐ Other (specify) ▼

State: WI

District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2			2	0	1	8		

FEC Identification Number

C C00652131**Transaction ID : SB23.390742**

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 27

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

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. NICHOLSON FOR SENATE

Mailing Address PO BOX 454

City
HARTLANDState
WIZip Code
53029Purpose of Disbursement
EARMARKED BY STEVE WISE ID# 23981

001

Category/
Type

Candidate Name

NICHOLSON, KEVIN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: WI

District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		06		2018

FEC Identification Number

C C00652131

Transaction ID : SB23.390743

Amount of Each Disbursement this Period

500.00

☒ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

1000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 27

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

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. ALLEGIANCE DIRECT LLC

Mailing Address 115 N KING ST STE 205

City
LEESBURGState
VAZip Code
20176Purpose of Disbursement
PAC DIRECT MAIL PRODUCTION (NON-CONTRIBUTION ACCOUNT)

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB29.390527

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DOUGLAS, KATHY, , ,

Mailing Address 901 MCCLENDON WALKER ROAD

City
ALEDOState
TXZip Code
76008Purpose of Disbursement
PAC ACCOUNTING SERVICES (NON-CONTRIBUTION ACCOUNT)

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB29.390665

Amount of Each Disbursement this Period

375.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELECTEK

Mailing Address PO BOX 23715

City
CHAGRIN FALLSState
OHZip Code
44023Purpose of Disbursement
PAC SOFTWARE (NON-CONTRIBUTION ACCOUNT)

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB29.390524

Amount of Each Disbursement this Period

300.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1175.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 27

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

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. PROFESSIONAL DATA SERVICES

Mailing Address 824 S MILLEDGE AVE STE 101

City
ATHENSState
GAZip Code
30605Purpose of Disbursement
PAC COMPLIANCE CONSULTING (NON-CONTRIBUTION ACCOUNT)

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB29.390663

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RYUN, JIM, , ,

Mailing Address 132 D ST SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
PAC STRATEGY CONSULTING (NON-CONTRIBUTION ACCOUNT)

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB29.390746

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SARATOGA STRATEGIES LLC

Mailing Address 1550 OLD ANNETTA ROAD

City
ALEDOState
TXZip Code
76008Purpose of Disbursement
PAC STRATEGY CONSULTING (NON-CONTRIBUTION ACCOUNT)

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB29.390522

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 27

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

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. SCHWYZER, HUGO, , ,

Mailing Address 8950 WEST OLYMPIC BLVD #482

City
BEVERLY HILLSState
CAZip Code
90211Purpose of Disbursement
PAC DATA WORK (NON-CONTRIBUTION ACCOUNT)

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		24		2018

FEC Identification Number

C

Transaction ID : SB29.390757

Amount of Each Disbursement this Period

 75.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SHAFER, KRISTOFFER, L., ,Mailing Address 2420 VIA BOLOGNA
APT. 2428City
FORT WORTHState
TXZip Code
76109Purpose of Disbursement
PAC STRATEGY CONSULTING (NON-CONTRIBUTION ACCOUNT)

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		19		2018

FEC Identification Number

C

Transaction ID : SB29.390748

Amount of Each Disbursement this Period

 2000.00☐ Memo Item

Full Name (Last, First, Middle Initial)

C. THE GOBER GROUPMailing Address 2101 CEDAR SPRINGS RD STE 1050
SUITE 1050City
DALLASState
TXZip Code
75201Purpose of Disbursement
PAC LEGAL FEES (NON-CONTRIBUTION ACCOUNT)

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		02		2018

FEC Identification Number

C

Transaction ID : SB29.390529

Amount of Each Disbursement this Period

 500.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 2575.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 27

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

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. THE RICHARD NORMAN COMPANY

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	3			2	0	1	8		

Mailing Address 113 EAST MARKET ST. STE. 300

City
LEESBURGState
VAZip Code
20176Purpose of Disbursement
PAC DIRECT MAIL PRODUCTION (NON-CONTRIBUTION ACCOUNT)

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB29.390755

Amount of Each Disbursement this Period

1956.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

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

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

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).....▶

1956.68

11206.68