

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**

REDEMPTION PAC

ADDRESS (number and street) 228 S WASHINGTON STREET
SUITE 115
ALEXANDRIA VA 22314
 Check if different than previously reported. (ACC)

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

C C00652305

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

4. TYPE OF REPORT (Choose One)

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

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

(c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S)

Election on / / in the State of

(d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period / / 07 01 2019 through / / 12 31 2019

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

Type or Print Name of Treasurer

Signature of Treasurer *Satterfield, David, , ,* [Electronically Filed] Date / / 01 31 2020

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**

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Page 2

Write or Type Committee Name

REDEMPTION PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>	<input type="text"/>	<input type="text" value="3618.48"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="97.88"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="64050.00"/>	<input type="text" value="73650.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="64147.88"/>	<input type="text" value="77268.48"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="13049.44"/>	<input type="text" value="26170.04"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="51098.44"/>	<input type="text" value="51098.44"/>
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

REDEMPTION PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	34750.00	38150.00
(ii) Unitemized	1050.00	1750.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	35800.00	39900.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	28250.00	33750.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	64050.00	73650.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	64050.00	73650.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	64050.00	73650.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	13049.44	26170.04
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	13049.44	26170.04
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	13049.44	26170.04
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13049.44	26170.04

DETAILED SUMMARY PAGE
of Disbursements

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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)	64050.00	73650.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	64050.00	73650.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	13049.44	26170.04
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	13049.44	26170.04

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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)
REDEMPTION PAC

A. Baker, Alta, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1115 Safe Haven Dr.
 City Jennings State LA Zip Code 70546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Safe Haven Occupation (for Individual) Self Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **09 / 25 / 2019**
Transaction ID : SA11AI.4347
 Amount of Each Receipt this Period 700.00
 Memo Item

B. Barraco, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 Garden Walk Dr.
 City Covington State LA Zip Code 70433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CRSC LLC Occupation (for Individual) Project Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **12 / 27 / 2019**
Transaction ID : SA11AI.4412
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. Beer, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2411 Culpeper Rd.
 City Alexandria State VA Zip Code 22308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Alignment Government Strat Occupation (for Individual) Govt Relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **12 / 20 / 2019**
Transaction ID : SA11AI.4404
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	6700.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 25
<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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NAME OF COMMITTEE (In Full)
REDEMPTION PAC

A. Bourgeois, Gerard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 1688

City Morgan City	State LA	Zip Code 70381
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Bourgeois Law LLC	Occupation (for Individual) Attorney
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2019

Transaction ID : SA11AI.4345

Amount of Each Receipt this Period
750.00

Memo Item

B. Bourgeois, Gerard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 1688

City Morgan City	State LA	Zip Code 70381
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Bourgeois Law LLC	Occupation (for Individual) Attorney
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 13 / 2019

Transaction ID : SA11AI.4369

Amount of Each Receipt this Period
700.00

Memo Item

C. Buchta, Kenneth, Patrick, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16740 E. Kingstree Blvd.

City Fountain Hills	State AZ	Zip Code 85268
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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
 11 / 13 / 2019

Transaction ID : SA11AI.4365

Amount of Each Receipt this Period
350.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1800.00
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 25
<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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NAME OF COMMITTEE (In Full)
REDEMPTION PAC

A. Cambon, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 908 Croton Dr.
 City Alexandria State VA Zip Code 22308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Livingston Group Occupation (for Individual) Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 11 / 26 / 2019
Transaction ID : SA11AI.4386
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Clark, Stephen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9273 Lerwick Dr.
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CGCN Group Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 27 / 2019
Transaction ID : SA11AI.4390
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Cox, Brad, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4514 Cole Ave. Suite 1175
 City Dallas State TX Zip Code 75205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Cox Oil Occupation (for Individual) Chairman
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 09 / 16 / 2019
Transaction ID : SA11AI.4344
 Amount of Each Receipt this Period
 700.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1950.00
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 9 OF 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
REDEMPTION PAC

A. Cumpton, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2116 Marchfield Dr. W.
 City Mobile State AL Zip Code 36693
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ryan Hicks Cumpton & Cumpton Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 13 / 2019
Transaction ID : SA11AI.4361
 Amount of Each Receipt this Period 350.00
 Memo Item

B. Dohmann, AJ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 Marquis Manor
 City Morgan City State LA Zip Code 70380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Auto Dealer
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 25 / 2019
Transaction ID : SA11AI.4348
 Amount of Each Receipt this Period 350.00
 Memo Item

C. Doucet, Shane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3814 Munson Rd.
 City Falls Church State VA Zip Code 22041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Doucet Consulting Solutions Occupation (for Individual) Principal
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 22 / 2019
Transaction ID : SA11AI.4372
 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 10 OF 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
REDEMPTION PAC

A. Ellis, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1228 Royral St.
 No. 6
 City New Orleans State LA Zip Code 70116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2019
Transaction ID : SA11AI.4410
 Amount of Each Receipt this Period
 5000.00
 Memo Item

B. Fouquet, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 129 Garden Walk Dr.
 City Covington State LA Zip Code 70433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CRSC Occupation (for Individual) Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2019
Transaction ID : SA11AI.4406
 Amount of Each Receipt this Period
 5000.00
 Memo Item

C. Furay, Guy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42 Lazy Willow Dr.
 City Simpsonville State SC Zip Code 29680
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Insurance Source Occupation (for Individual) Sales
 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
 12 / 18 / 2019
Transaction ID : SA11AI.4402
 Amount of Each Receipt this Period
 350.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	10350.00
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 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
REDEMPTION PAC

A. Geduldig, Sam, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1101 K St. NW
 City Washington State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CGCN Group Occupation (for Individual) Principal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 27 / 2019**
Transaction ID : SA11AI.4388
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Global Crane LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3500 Queenan Industrial Park Rd.
 City Westlake State LA Zip Code 70669
 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 ▼ 1050.00

Date of Receipt **12 / 18 / 2019**
Transaction ID : SA11AI.4418
 Amount of Each Receipt this Period 1050.00
 Memo Item
 Permissible Funds. See Attribution Below.

C. Queenan, Angela, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5555 N Perkins Ferry Rd
 City Lake Charles State LA Zip Code 70611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Global Crane Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt **12 / 18 / 2019**
Transaction ID : SA11AI.4418.0
 Amount of Each Receipt this Period 1050.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1300.00
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 12 OF 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
REDEMPTION PAC

A. Hebert, Patrick, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2027 Hwy. 182 E.
 City Morgan City State LA Zip Code 70380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) General Contractor
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt **10 / 08 / 2019**
Transaction ID : SA11AI.4354
 Amount of Each Receipt this Period 350.00
 Memo Item

B. Heinen, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21014 Dama Landry Rd.
 City Jennings State LA Zip Code 70546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Jeff Davis Electric Co-Op Inc Occupation (for Individual) General Manager
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt **11 / 26 / 2019**
Transaction ID : SA11AI.4379
 Amount of Each Receipt this Period 350.00
 Memo Item

C. Hensgens, Catherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 315 Carmen Dr.
 City Arnaudville State LA Zip Code 70512
 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 ▼ 1050.00

Date of Receipt **11 / 26 / 2019**
Transaction ID : SA11AI.4384
 Amount of Each Receipt this Period 1050.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1750.00
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 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
REDEMPTION PAC

A. Kyle, Timothy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 Jeffery St
 City Patterson State LA Zip Code 70392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kyle Machine Inc Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 25 / 2019
Transaction ID : SA11AI.4352
 Amount of Each Receipt this Period 350.00
 Memo Item

B. Labuff, Angela, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 119 Executive Dr.
 City Kinder State LA Zip Code 70648
 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 ▼ 1400.00

Date of Receipt 11 / 13 / 2019
Transaction ID : SA11AI.4370
 Amount of Each Receipt this Period 1400.00
 Memo Item

C. Lad Salvage LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 S. Prescott Dr.
 City Morgan City State LA Zip Code 70380
 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 ▼ 350.00

Date of Receipt 11 / 26 / 2019
Transaction ID : SA11AI.4376
 Amount of Each Receipt this Period 350.00
 Memo Item
 Permissible Funds. See Attribution Below

SUBTOTAL of Receipts This Page (optional)..... ▶ 2100.00
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 14 OF 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
REDEMPTION PAC

A. Dagna, Lee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 S. Prescott Dr.
 City Morgan City State LA Zip Code 70380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lad Savage LLC Occupation (for Individual) Member
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 11 / 26 / 2019
Transaction ID : SA11AI.4376.0
 Amount of Each Receipt this Period 350.00
 Memo Item

B. Lorio, Amber, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6427 Province Ln.
 City Baton Rouge State LA Zip Code 70808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dudley Debosier Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 13 / 2019
Transaction ID : SA11AI.4367
 Amount of Each Receipt this Period 350.00
 Memo Item

C. Munk, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 H St. NW Box 61
 City Washington State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Munk Policy and Law PLLC Occupation (for Individual) Partner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 10 / 2019
Transaction ID : SA11AI.4394
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	850.00
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 15 OF 25
	<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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NAME OF COMMITTEE (In Full)
REDEMPTION PAC

A. Nettles, Shelley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9390 Wyndham Way
 City Denham Springs State LA Zip Code 70726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hargrove & Assoc Occupation (for Individual) Process Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 13 / 2019
Transaction ID : SA11AI.4363
 Amount of Each Receipt this Period 350.00
 Memo Item

B. Nungesser Consulting LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 790408
 City Baton Rouge State LA Zip Code 70821
 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 ▼ 350.00

Date of Receipt 12 / 18 / 2019
Transaction ID : SA11AI.4414
 Amount of Each Receipt this Period 350.00
 Memo Item
 Permissible Funds. See Attribution Below.

C. Nungesser, Sally, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 790408
 City Baton Rouge State LA Zip Code 70821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Fundraising
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 18 / 2019
Transaction ID : SA11AI.4414.0
 Amount of Each Receipt this Period 350.00
 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:	PAGE 16 OF 25
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REDEMPTION PAC

A. Pallerin, Glynn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 578 Parish Rd. 131

City Franklin	State LA	Zip Code 70538
------------------	-------------	-------------------

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

Name of Employer (for Individual) St. Mary Parish School Board	Occupation (for Individual) Transportation
---	---

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
 09 / 16 / 2019

Transaction ID : SA11AI.4342

Amount of Each Receipt this Period
 350.00

Memo Item

B. Smith, Brad, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4106 Chauvin Ln

City Monroe	State LA	Zip Code 71201
----------------	-------------	-------------------

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

Name of Employer (for Individual) Reliant Healthcare	Occupation (for Individual) Owner
---	--------------------------------------

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
 09 / 25 / 2019

Transaction ID : SA11AI.4350

Amount of Each Receipt this Period
 350.00

Memo Item

C. Stanley Estates LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1538 Lincoln Ave.

City San Jose	State CA	Zip Code 95125
------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
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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
 11 / 26 / 2019

Transaction ID : SA11AI.4381

Amount of Each Receipt this Period
 350.00

Memo Item

Permissible Funds. See Attribution Below.

SUBTOTAL of Receipts This Page (optional).....▶	1050.00
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 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
REDEMPTION PAC

A. Stanley, Cynthia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1548 Lincoln Ave.
 City San Jose State CA Zip Code 95125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Stanley Estates LLC Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 26 / 2019
Transaction ID : SA11AI.4381.0
 Amount of Each Receipt this Period 350.00
 Memo Item

B. Szabo, Aaron, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1210 Queen St. #5
 City Alexandria State VA Zip Code 22314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CGCN Group Occupation (for Individual) Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 27 / 2019
Transaction ID : SA11AI.4392
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Trascher, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1041 Constance St. #310
 City New Orleans State LA Zip Code 70130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gulf South Strategies USA LLC Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 27 / 2019
Transaction ID : SA11AI.4408
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5250.00
TOTAL This Period (last page this line number only).....	34750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 25
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REDEMPTION PAC

A. ARPAC

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

Mailing Address 451 FLORIDA STREET
BANK ONE CENTRE N TOWER 19TH FLOOR

City BATON ROUGE	State LA	Zip Code 70801
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00226472

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2019

Transaction ID : SA11C.4334

Amount of Each Receipt this Period
2500.00

Memo Item

B. BIKERS FOR THE PRESIDENT PAC

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

Mailing Address 441 NORTH LEE STREET, SUITE 100

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00662148

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

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
08	/	21	/	2019

Transaction ID : SA11C.4324

Amount of Each Receipt this Period
250.00

Memo Item

C. BLANK ROME PAC

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

Mailing Address 1825 EYE STREET NW

City WASHINGTON	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00150797

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

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
11	/	26	/	2019

Transaction ID : SA11C.4330

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	3750.00
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 25
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REDEMPTION PAC

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

Mailing Address 701 8TH STREET NW
SUITE 810

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00430157

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2019

Transaction ID : SA11C.4340

Amount of Each Receipt this Period
2500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ENTERGY CORPORATION POLITICAL ACTION COMMITTEE (ENPAC)

Mailing Address 425 WEST CAPITOL AVENUE, STE24B

City LITTLE ROCK State AR Zip Code 72201

FEC ID number of contributing federal political committee. **C** C00363879

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 27 / 2019

Transaction ID : SA11C.4336

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MOTOROLA SOLUTIONS, INC. POLITICAL ACTION COMMITTEE

Mailing Address 1455 PENNSYLVANIA AVENUE, NW
SUITE 900

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00075341

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

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
12 / 17 / 2019

Transaction ID : SA11C.4338

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	8500.00
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 20 OF 25
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REDEMPTION PAC

A. NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 430 NORTH MICHIGAN AVENUE

City CHICAGO	State IL	Zip Code 60611
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00030718

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2019

Transaction ID : SA11C.4424

Amount of Each Receipt this Period
5000.00

Memo Item

B. TELLURIAN INC PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1201 LOUISIANA STREET SUITE 3100

City HOUSTON	State TX	Zip Code 77002
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00635516

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2019

Transaction ID : SA11C.4328

Amount of Each Receipt this Period
5000.00

Memo Item

C. THE COMMITTEE TO DEFEND THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 441 NORTH LEE STREET STE 205

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00544767

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

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
11	/	26	/	2019

Transaction ID : SA11C.4326

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	11000.00
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 21 OF 25
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REDEMPTION PAC

A. THE EYE OF THE TIGER POLITICAL ACTION COMMITTEE

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00467431

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	26	/	2019

Transaction ID : SA11C.4332

Amount of Each Receipt this Period
5000.00

Memo Item

B.

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

C.

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	28250.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
REDEMPTION PAC

Full Name (Last, First, Middle Initial) A. A Bryan Jewelers			Date of Disbursement M M / D D / Y Y Y Y Y 10 / 08 / 2019	
Mailing Address 4901 Johnston St			FEC Identification Number C [] Transaction ID : SB21B.4304 Amount of Each Disbursement this Period [] 237.62	
City Lafayette	State LA	Zip Code 70503	Category/Type []	
Purpose of Disbursement Donor/Constituent Gifts			Memo Item <input type="checkbox"/>	
Candidate Name			Amount of Each Disbursement this Period [] 237.62	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:				
Full Name (Last, First, Middle Initial) B. Anedot			Date of Disbursement M M / D D / Y Y Y Y Y 12 / 31 / 2019	
Mailing Address P.O. Box 84314			FEC Identification Number C [] Transaction ID : SB21B.4316 Amount of Each Disbursement this Period [] 1041.80	
City Baton Rouge	State LA	Zip Code 70884	Category/Type []	
Purpose of Disbursement Credit Card Processing Fees			Memo Item <input type="checkbox"/>	
Candidate Name			Amount of Each Disbursement this Period [] 1041.80	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:				
Full Name (Last, First, Middle Initial) C. Chase Card Services			Date of Disbursement M M / D D / Y Y Y Y Y 12 / 13 / 2019	
Mailing Address P.O. Box 1423			FEC Identification Number C [] Transaction ID : SB21B.4313 Amount of Each Disbursement this Period [] 2758.96	
City Charlotte	State NC	Zip Code 28201	Category/Type []	
Purpose of Disbursement Credit Card Payment: See Itemization Below			Memo Item <input type="checkbox"/>	
Candidate Name			Amount of Each Disbursement this Period [] 2758.96	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:				
SUBTOTAL of Disbursements This Page (optional)..... ▶			[] 4038.38	
TOTAL This Period (last page this line number only)..... ▶			[]	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
REDEMPTION PAC

Full Name (Last, First, Middle Initial) A. Hilton Washington		Date of Disbursement MM / DD / YYYY 12 / 13 / 2019	
Mailing Address 1919 Connecticut Ave.		FEC Identification Number C [] Transaction ID : SB21B.4313.1 Amount of Each Disbursement this Period [] 2758.96	
City Washington	State DC	Zip Code 20009	Category/ Type []
Purpose of Disbursement Event Catering Expense			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Gil, Beth, , ,		Date of Disbursement MM / DD / YYYY 12 / 06 / 2019	
Mailing Address P.O. Box 157		FEC Identification Number C [] Transaction ID : SB21B.4309 Amount of Each Disbursement this Period [] 334.03	
City Patterson	State LA	Zip Code 70392	Category/ Type []
Purpose of Disbursement Expense Reimbursement: See Itemization Below			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Caroline & Company		Date of Disbursement MM / DD / YYYY 12 / 06 / 2019	
Mailing Address 113 Arnould Blvd		FEC Identification Number C [] Transaction ID : SB21B.4309. Amount of Each Disbursement this Period [] 334.03	
City Lafayette	State LA	Zip Code 70506	Category/ Type []
Purpose of Disbursement Donor/Constituent Gifts			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)..... ▶	[] 334.03
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)
REDEMPTION PAC

A. Huckaby Davis Lisker

Full Name (Last, First, Middle Initial)

Mailing Address 228 S. Washington St.
#115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
FEC Compliance and Accounting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 06 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.4311**

Amount of Each Disbursement this Period: 1943.72

Memo Item

B. Miller, Andree, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5255 Congress Blvd.
#58

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 07 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.4302**

Amount of Each Disbursement this Period: 2500.00

Memo Item

C. Miller, Andree, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5255 Congress Blvd.
#58

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement
Expense Reimbursement: See Itemization Below

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 10 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.4312**

Amount of Each Disbursement this Period: 473.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4916.72

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
REDEMPTION PAC

Full Name (Last, First, Middle Initial)
A. American Airlines

Date of Disbursement
MM / DD / YYYY
12 / 10 / 2019

Mailing Address 4333 Amon Carter Blvd

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement Air Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

FEC Identification Number
C
Transaction ID : SB21B.4312.4
Amount of Each Disbursement this Period
473.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Mystic Krewe of Louisianans

Date of Disbursement
MM / DD / YYYY
10 / 22 / 2019

Mailing Address P.O. Box 80518

City Baton Rouge State LA Zip Code 70898

Purpose of Disbursement Fundraising Event Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

FEC Identification Number
C
Transaction ID : SB21B.4303
Amount of Each Disbursement this Period
750.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Mystic Krewe of Louisianans

Date of Disbursement
MM / DD / YYYY
12 / 16 / 2019

Mailing Address P.O. Box 80518

City Baton Rouge State LA Zip Code 70898

Purpose of Disbursement Fundraising Event Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

FEC Identification Number
C
Transaction ID : SB21B.4314
Amount of Each Disbursement this Period
3000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3750.00

TOTAL This Period (last page this line number only)..... ▶ 13039.13