

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

AMERICANS FOR THE CURE OF BREAST CANCER

ADDRESS (number and street)

8444 COUNTY RD M

Check if different than previously reported. (ACC)

Fredonia

WI

53021

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00660233

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

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

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

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

Election on

MM / DD / YYYY

in the State of

XX

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

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

Election on

MM / DD / YYYY

in the State of

XX

5. Covering Period

MM / DD / YYYY 04 / 01 / 2018

through

MM / DD / YYYY 06 / 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.

Piario, Robert, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Piario, Robert, , ,

[Electronically Filed]

Date

MM / DD / YYYY 07 / 15 / 2018

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

Office Use Only

FEC FORM 3X Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

AMERICANS FOR THE CURE OF BREAST CANCER

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>	<input type="text"/>	<input type="text" value="312.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="62316.15"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="747025.34"/>	<input type="text" value="943805.34"/>
(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="809341.49"/>	<input type="text" value="944117.34"/>
7. Total Disbursements (from Line 31).....	<input type="text" value=".00"/>	<input type="text" value="134775.85"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="809341.49"/>	<input type="text" value="809341.49"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value=".00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value=".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

AMERICANS FOR THE CURE OF BREAST CANCER

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).....	2775.00	3225.00
(ii) Unitemized	744250.34	940580.34
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	747025.34	943805.34
(b) Political Party Committees .....	.00	.00
(c) Other Political Committees (such as PACs).....	.00	.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	747025.34	943805.34
12. Transfers From Affiliated/Other Party Committees.....	.00	.00
13. All Loans Received .....	.00	.00
14. Loan Repayments Received.....	.00	.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	.00	.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	.00	.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	.00	.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	.00	.00
(b) Levin Funds (from Schedule H5) .....	.00	.00
(c) Total Transfers (add 18(a) and 18(b))..	.00	.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	747025.34	943805.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	747025.34	943805.34

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 .....	.00	.00
(ii) Non-Federal Share.....	.00	.00
(b) Other Federal Operating Expenditures .....	.00	134775.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	.00	134775.85
22. Transfers to Affiliated/Other Party Committees.....	.00	.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	.00	.00
24. Independent Expenditures (use Schedule E) .....	.00	.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	.00	.00
26. Loan Repayments Made.....	.00	.00
27. Loans Made.....	.00	.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	.00	.00
(b) Political Party Committees .....	.00	.00
(c) Other Political Committees (such as PACs).....	.00	.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	.00	.00
29. Other Disbursements (Including Non-Federal Donations).....	.00	.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	.00	.00
(ii) "Levin" Share.....	.00	.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	.00	.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	.00	.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	.00	134775.85
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	.00	134775.85

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)	747025.34	943805.34
34. Total Contribution Refunds (from Line 28(d)) .....	.00	.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	747025.34	943805.34
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	.00	134775.85
37. Offsets to Operating Expenditures (from Line 15, page 3).....	.00	.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	.00	134775.85

**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 8
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
AMERICANS FOR THE CURE OF BREAST CANCER

A. Brotz, Roman, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1302 Ridgewood Ln

City Sheboygan	State WI	Zip Code 53081
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) N/A
--	------------------------------------

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
06	/	18	/	2018

Transaction ID : SA11Ai-CN26951

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 4825 Derry St

City Harrisburg	State PA	Zip Code 17111
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

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

Transaction ID : SA11Ai-CN16472

Amount of Each Receipt this Period
75.00

Memo Item

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

Mailing Address 250 N Royal St

City Mobile	State AL	Zip Code 36602
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual) CFO
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

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

Transaction ID : SA11Ai-CN7660

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	875.00
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 8
	<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)
AMERICANS FOR THE CURE OF BREAST CANCER

A. Ellis, James, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 139 Chatworth Ave

City Warwick	State RI	Zip Code 2886
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

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

Transaction ID : SA11Ai-CN17905

Amount of Each Receipt this Period
75.00

Memo Item

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

Mailing Address 23861 State Highway 49

City Jefferson	State TX	Zip Code 75657
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNAVAILABLE	Occupation (for Individual) UNAVAILABLE
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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
04		30		2018

Transaction ID : SA11Ai-CN19821

Amount of Each Receipt this Period
750.00

Memo Item

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

Mailing Address 1398 W Nimisila Rd

City Clinton	State OH	Zip Code 44216
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		17		2018

Transaction ID : SA11Ai-CN11387

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1075.00
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 8
<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)
AMERICANS FOR THE CURE OF BREAST CANCER

A. Roberts, Dorothy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1970 Lemon Ranch Rd
 Rd
 City Santa Barbara State CA Zip Code 93108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2018
Transaction ID : SA11Ai-CN11411
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Rosenbaum, Sandra, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73068 Bel Air Rd
 City Palm Desert State CA Zip Code 92260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNAVAILABLE Occupation (for Individual) ARTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2018
Transaction ID : SA11Ai-CN7486
 Amount of Each Receipt this Period
 75.00
 Memo Item

C. Webb-Bradford, Molly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14441 Troon Dr
 City Bardstown State KY Zip Code 40265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2018
Transaction ID : SA11Ai-CN11933
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	825.00
TOTAL This Period (last page this line number only).....	2775.00