

# 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

Reclaim America PAC

ADDRESS (number and street) 228 S WASHINGTON ST STE 115

Check if different than previously reported. (ACC) Alexandria VA 22314

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

C C00500025

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

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

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

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

Election on M M / D D / Y Y Y Y Y Y in the State of  

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

Election on M M / D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y Y Y 06 / 01 / 2021 through M M / D D / Y Y Y Y Y Y 06 / 30 / 2021

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

Lisker, Lisa, , ,

Type or Print Name of Treasurer \_\_\_\_\_

Signature of Treasurer Lisker, Lisa, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 07 / 20 / 2021

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

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

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**Reclaim America 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="2021"/>	<input type="text" value="169899.50"/>	<input type="text" value="169899.50"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="138126.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="80500.00"/>	<input type="text" value="183444.36"/>
(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="218626.00"/>	<input type="text" value="353343.86"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="55021.59"/>	<input type="text" value="189739.45"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="163604.41"/>	<input type="text" value="163604.41"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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

**Reclaim America 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).....	2500.00	16000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2500.00	16000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	16500.00	33000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	19000.00	49000.00
12. Transfers From Affiliated/Other Party Committees.....	61500.00	124444.36
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	10000.00
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)).....▶	80500.00	183444.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	80500.00	183444.36

**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 .....	32021.59	136739.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	32021.59	136739.45
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	23000.00	48000.00
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	5000.00
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)) ..	55021.59	189739.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	55021.59	189739.45

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	19000.00	49000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	19000.00	49000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	32021.59	136739.45
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	32021.59	136739.45

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

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

FOR LINE NUMBER: PAGE 6 OF 23  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Reclaim America PAC**

**A. SEMINOLE TRIBE OF FLORIDA**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6300 STIRLING ROAD  
 City HOLLYWOOD State FL Zip Code 33024-2153  
 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 ▼  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2021  
**Transaction ID : SA11A.1530972**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item  
**CONTRIBUTION**

**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 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 Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2500.00

**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 7 OF 23
<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)  
**Reclaim America PAC**

**A. AMERISOURCEBERGEN CORPORATION PAC**

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

Mailing Address 1300 MORRIS DRIVE  
SUITE 100

City CHESTERBROOK State PA Zip Code 19087-5559

FEC ID number of contributing federal political committee. **C** C00400929

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
06 / 30 / 2021  
**Transaction ID : SA11C.1571665**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

**B. NATIONAL MULTI HOUSING COUNCIL POLITICAL ACTION COMMITTEE**

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

Mailing Address 1775 EYE ST. NW  
SUITE 1100

City WASHINGTON State DC Zip Code 20006-2424

FEC ID number of contributing federal political committee. **C** C00130773

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
06 / 30 / 2021  
**Transaction ID : SA11C.1571666**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. NEXTERA ENERGY PAC**

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

Mailing Address 700 UNIVERSE BLVD

City JUNO BEACH State FL Zip Code 33408-2657

FEC ID number of contributing federal political committee. **C** C00064774

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
06 / 21 / 2021  
**Transaction ID : SA11C.1571664**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11500.00
<b>TOTAL</b> 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 8 OF 23  
(check only one)

<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)  
**Reclaim America PAC**

**A. PNC PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 249 FIFTH AVENUE, 21ST FLOOR

City PITTSBURGH	State PA	Zip Code 15222-2707
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00035519

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  
06 / 30 / 2021

**Transaction ID : SA11C.1571667**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	16500.00



**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 9 OF 23
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Reclaim America PAC**

**A. RUBIO VICTORY COMMITTEE**

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

Mailing Address 228 S WASHINGTON ST  
STE 115

City ALEXANDRIA State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00494617

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 124444.36

Date of Receipt 06 / 30 / 2021  
**Transaction ID : SA12.1571668**

Amount of Each Receipt this Period 61500.00

Memo Item  
TRANSFER  
DISTRIBUTION OF NET JFC PROCEEDS

**B. ARNOTT, ROBERT, D., MR.,**

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

Mailing Address PO BOX 53725

City IRVINE State CA Zip Code 92619-3725

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

Name of Employer (for Individual) Occupation (for Individual)  
RESEARCH AFFILIATES CHAIRMAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 12 / 2021  
**Transaction ID : SA.1465886.1.0621**

Amount of Each Receipt this Period 5000.00

Memo Item  
TRANSFER  
TRANSFER FROM RUBIO VICTORY

**C. BALLARD, BRIAN, D., MR.,**

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

Mailing Address 201 E PARK AVENUE

City TALLAHASSEE State FL Zip Code 32301-1511

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

Name of Employer (for Individual) Occupation (for Individual)  
BALLARD PARTNERS ATTORNEY/LOBBYIST

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 28 / 2021  
**Transaction ID : SA.1508429.1.0621**

Amount of Each Receipt this Period 5000.00

Memo Item  
TRANSFER  
TRANSFER FROM RUBIO VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	61500.00
<b>TOTAL</b> 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 23
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Reclaim America PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. BARKLEY, ROBERT, D., MR.,</b>		Date of Receipt MM / DD / YYYY 05 / 17 / 2021
Mailing Address 6405 BANDERA AVE. APT. 3A		<b>Transaction ID : SA.1500998.1.0621</b>
City DALLAS	State TX	Zip Code 75225-3702
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2700.00	TRANSFER FROM RUBIO VICTORY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. FUSSNER, CHRISTOPHER, JOHN, MR.,</b>		Date of Receipt MM / DD / YYYY 05 / 28 / 2021
Mailing Address 196-37 DUNTON AVENUE		<b>Transaction ID : SA.1508419.1.0621</b>
City HOLLIS	State NY	Zip Code 11423-1445
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) TRANSTECHNOLOGY PTE LTD	Occupation (for Individual) PRESIDENT	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM RUBIO VICTORY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. HAMISTER, MARK, E., MR.,</b>		Date of Receipt MM / DD / YYYY 04 / 11 / 2021
Mailing Address 2445 SOUTH OCEAN BOULEVARD		<b>Transaction ID : SA.1465235.1.0621</b>
City HIGHLAND BEACH	State FL	Zip Code 33487-1833
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) HAMISTER GROUP LLC	Occupation (for Individual) CHAIRMAN AND CEO	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	TRANSFER FROM RUBIO VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> 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 23
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Reclaim America PAC**

**A. HEGYI, ALBERT, P., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 245 PARK AVENUE  
39TH FLOOR

City NEW YORK State NY Zip Code 10167-0002

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

Name of Employer (for Individual) 1ST FINANCIAL BANK USA Occupation (for Individual) BANKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 17 / 2021  
**Transaction ID : SA.1498975.1.0621**

Amount of Each Receipt this Period 5000.00

Memo Item  
TRANSFER  
TRANSFER FROM RUBIO VICTORY

**B. KIRTLEY, JOHN, F., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 511 W. BAY STREET STE 363

City TAMPA State FL Zip Code 33606-2737

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

Name of Employer (for Individual) K.L.H. CAPITAL Occupation (for Individual) VENTURE CAPITALIST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 04 / 15 / 2021  
**Transaction ID : SA.1471477.1.0621**

Amount of Each Receipt this Period 2700.00

Memo Item  
TRANSFER  
TRANSFER FROM RUBIO VICTORY

**C. LEONE, DOUGLAS, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13385 ROBLEDA ROAD

City LOS ALTOS HILLS State CA Zip Code 94022-3490

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

Name of Employer (for Individual) SEQUOIA CAPITAL Occupation (for Individual) VENTURE CAPITAL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 23 / 2021  
**Transaction ID : SA.1541736.1.0621**

Amount of Each Receipt this Period 5000.00

Memo Item  
TRANSFER  
TRANSFER FROM RUBIO VICTORY

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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 23
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Reclaim America PAC**

**A. LEONE, PATRICIA, PERKINS, MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13385 ROBLEDA ROAD

City LOS ALTOS HILLS	State CA	Zip Code 94022-3490
-------------------------	-------------	------------------------

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

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

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
06	/	23	/	2021

**Transaction ID : SA.1541737.1.0621**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM RUBIO VICTORY

**B. MOREIRA, DOMINGO, R., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8600 SW 52 AVE

City MIAMI	State FL	Zip Code 33143-8447
---------------	-------------	------------------------

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 ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2021

**Transaction ID : SA.1499141.1.0621**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM RUBIO VICTORY

**C. NICOLLS, CARL, R., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1265 CARRIAGE HILL COURT

City FRANKTOWN	State CO	Zip Code 80116-8903
-------------------	-------------	------------------------

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

Name of Employer (for Individual) MONARCH INVESTMENTS	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
4200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	03	/	2021

**Transaction ID : SA.1515405.1.0621**

Amount of Each Receipt this Period  
4200.00

Memo Item  
TRANSFER  
TRANSFER FROM RUBIO VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> 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 23
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Reclaim America PAC**

**A. SANCHEZ, DOMINGO, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2800 VICKIE CT.

City KISSIMMEE	State FL	Zip Code 34744-5124
-------------------	-------------	------------------------

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

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

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
05	/	20	/	2021

**Transaction ID : SA.1501000.1.0621**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM RUBIO VICTORY

**B. SCHAR, DWIGHT, C., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 505 SOUTH FLAGLER DRIVE

City WEST PALM BEACH	State FL	Zip Code 33401-5923
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) NVR HOMES	Occupation (for Individual) CHAIRMAN AND CEO
--	---

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
05	/	28	/	2021

**Transaction ID : SA.1541734.1.0621**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM RUBIO VICTORY

**C. SCHAR, MARTHA, M., MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 550 S OCEAN BLVD

City PALM BEACH	State FL	Zip Code 33480-4737
--------------------	-------------	------------------------

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 ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2021

**Transaction ID : SA.1541733.1.0621**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM RUBIO VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> 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 23
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Reclaim America PAC**

**A. SINITO, FRANK, T., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8111 ROCKSIDE RD STE 200  
 City VALLEY VIEW State OH Zip Code 44125-6135  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) THE MILLENAIRE COMPANIES Occupation (for Individual) CHIEF EXECUTIVE OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 05 / 13 / 2021  
**Transaction ID : SA.1500996.1.0621**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM RUBIO VICTORY

**B. STEPHENSON, ELIZABETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 58 N. COLLIER BLVD APT. 2202  
 City MARCO ISLAND State FL Zip Code 34145-3761  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 15 / 2021  
**Transaction ID : SA.1471473.1.0621**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM RUBIO VICTORY

**C. SUTTON, MEREDITH, M., MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 718 HAWKSBILL ISLAND DR  
 City SATELLITE BEACH State FL Zip Code 32937-3851  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SUTTON PROPERTIES Occupation (for Individual) HOMEMAKER/DEVELOPER  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 07 / 2021  
**Transaction ID : SA.1471470.1.0621**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM RUBIO VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	61500.00

**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)  
**Reclaim America PAC**

**A. GRUDA, MATTHEW, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address C/O 228 S. WASHINGTON ST STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 15 / 2021

FEC Identification Number: C

Transaction ID : SB21B.I3396

Amount of Each Disbursement this Period: 2500.00

Memo Item

**B. GRUDA, MATTHEW, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address C/O 228 S. WASHINGTON ST STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 30 / 2021

FEC Identification Number: C

Transaction ID : SB21B.I3396

Amount of Each Disbursement this Period: 2500.00

Memo Item

**C. HOLLER, DAN, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address C/O 228 S. WASHINGTON ST. STE. 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 30 / 2021

FEC Identification Number: C

Transaction ID : SB21B.I3395

Amount of Each Disbursement this Period: 1667.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6667.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Reclaim America PAC**

**A. HOWD, CHRIS, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY  
06 / 30 / 2021

Mailing Address 1024 N. RANDOLPH ST.

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement ADMINISTRATIVE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : SB21B.I3295f

Amount of Each Disbursement this Period: 316.80

Memo Item

**B. MORGAN, MARK, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY  
06 / 15 / 2021

Mailing Address C/O 228 S. WASHINGTON ST., STE. 11

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : SB21B.I3395f

Amount of Each Disbursement this Period: 3375.00

Memo Item

**C. MORGAN, MARK, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY  
06 / 30 / 2021

Mailing Address C/O 228 S. WASHINGTON ST., STE. 11

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : SB21B.I3396

Amount of Each Disbursement this Period: 3375.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 7066.80

**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)  
**Reclaim America PAC**

Full Name (Last, First, Middle Initial) <b>A. NEEDHAM, MICHAEL, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2021
Mailing Address C/O 228 S. WASHINGTON ST. STE. 115		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I3396:</b> Amount of Each Disbursement this Period 2313.75
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement STRATEGIC CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. BB&amp;T FINANCIAL</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2021
Mailing Address P.O. BOX 580340		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I3295:</b> Amount of Each Disbursement this Period 1472.08
City CHARLOTTE	State NC	Zip Code 28258
Purpose of Disbursement CREDIT CARD PAYMENT - SEE MEMOS		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. AMERICAN AIRLINES</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2021
Mailing Address 4333 AMON CARTER BOULEVARD MD 5675		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I3396</b> Amount of Each Disbursement this Period 377.68
City SAVANNAH	State TX	Zip Code 94103
Purpose of Disbursement TRAVEL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

3785.83

**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)  
**Reclaim America PAC**

Full Name (Last, First, Middle Initial) <b>A. COURTYARD BY MARRIOTT</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2021
Mailing Address 10400 FERNWOOD ROAD		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I3396</b> Amount of Each Disbursement this Period [REDACTED] 295.98
City BETHESDA	State MD	Zip Code 20817-1102
Purpose of Disbursement TRAVEL		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. JETBLUE</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2021
Mailing Address 27-01 QUEENS PLAZA NORTH		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I3397</b> Amount of Each Disbursement this Period [REDACTED] 208.41
City LONG ISLAND CITY	State NY	Zip Code 11101-7212
Purpose of Disbursement TRAVEL		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. TOWNEPLACE SUITES</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2021
Mailing Address 4801 LENOIR AVE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I3396</b> Amount of Each Disbursement this Period [REDACTED] 277.98
City JACKSONVILLE	State FL	Zip Code 32216-6302
Purpose of Disbursement TRAVEL		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Reclaim America PAC**

Full Name (Last, First, Middle Initial)  
**A. CMDI**

Mailing Address 1593 SPRING HILL RD., STE. 400  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 30 / 2021

FEC Identification Number: C

Transaction ID : SB21B.I3395

Amount of Each Disbursement this Period: 250.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. HOLTZMAN VOGEL PLLC**

Mailing Address 15405 JOHN MARSHALL HWY

City HAYMARKET State VA Zip Code 20169

Purpose of Disbursement LEGAL FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 30 / 2021

FEC Identification Number: C

Transaction ID : SB21B.I3395

Amount of Each Disbursement this Period: 5000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. HUCKABY DAVIS LISKER INC.**

Mailing Address 228 S. WASHINGTON ST, STE. 115  
SUITE 115

City ALEXANDRIA State VA Zip Code 22314-5408

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 30 / 2021

FEC Identification Number: C

Transaction ID : SB21B.I3395

Amount of Each Disbursement this Period: 1871.71

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 7121.71

**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)  
**Reclaim America PAC**

Full Name (Last, First, Middle Initial)  
**A. SOCKO STRATEGIES LLC**

Mailing Address 4323 CATHEDRAL AVE., NW

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

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

State: District:

Date of Disbursement 06 / 30 / 2021

FEC Identification Number C

Transaction ID : SB21B.I3396

Amount of Each Disbursement this Period 3334.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. SOCKO STRATEGIES LLC**

Mailing Address 4323 CATHEDRAL AVE., NW

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

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

State: District:

Date of Disbursement 06 / 30 / 2021

FEC Identification Number C

Transaction ID : SB21B.I3396

Amount of Each Disbursement this Period 4034.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 7368.00

**TOTAL** This Period (last page this line number only)..... ▶ 32009.34

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Reclaim America PAC**

Full Name (Last, First, Middle Initial)  
**A. ASHLEY HINSON FOR CONGRESS**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	5		2	0	2	1		

Mailing Address PO BOX 811

FEC Identification Number

**C** C00706267

**Transaction ID : SB23.I32953**

Amount of Each Disbursement this Period

1000.00

Memo Item

City MARION State IA Zip Code 52302

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**ARENHOLZ, ASHLEY, HINSON, ,**

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼

State: IA District: 01

Full Name (Last, First, Middle Initial)  
**B. BERNIE MORENO FOR OHIO**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	5		2	0	2	1		

Mailing Address 30628 DETROIT RD #184

FEC Identification Number

**C** C00775585

**Transaction ID : SB23.I32956**

Amount of Each Disbursement this Period

5000.00

Memo Item

City WESTLAKE State OH Zip Code 44145

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**MORENO, BERNIE, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼

State: OH District:

Full Name (Last, First, Middle Initial)  
**C. CHIP ROY FOR CONGRESS**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	7		2	0	2	1		

Mailing Address 6705 W. HWY 290  
SUITE 50295

FEC Identification Number

**C** C00662767

**Transaction ID : SB23.I32957**

Amount of Each Disbursement this Period

1000.00

Memo Item

City AUSTIN State TX Zip Code 78735

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**ROY, CHIP, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼

State: TX District: 21

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

7000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**Reclaim America PAC**

Full Name (Last, First, Middle Initial)  
**A. CITIZENS FOR JOSH MANDEL INC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		25		2021

Mailing Address 24780 PENSHURST DRIVE

FEC Identification Number

**C** C00494930

**Transaction ID : SB23.I32959**

Amount of Each Disbursement this Period

5000.00

Memo Item

City BEACHWOOD State OH Zip Code 44122

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**MANDEL, JOSH, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: OH District:

Full Name (Last, First, Middle Initial)  
**B. HOEVEN FOR SENATE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		08		2021

Mailing Address PO BOX 861

FEC Identification Number

**C** C00473371

**Transaction ID : SB23.I33955**

Amount of Each Disbursement this Period

5000.00

Memo Item

City BISMARCK State ND Zip Code 58502

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**HOEVEN, JOHN, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: ND District:

Full Name (Last, First, Middle Initial)  
**C. HOEVEN FOR SENATE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		08		2021

Mailing Address PO BOX 861

FEC Identification Number

**C** C00473371

**Transaction ID : SB23.I33956**

Amount of Each Disbursement this Period

5000.00

Memo Item

City BISMARCK State ND Zip Code 58502

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**HOEVEN, JOHN, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: ND District:

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

15000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**Reclaim America PAC**

### A. TONY GONZALES FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1112 E EUCLID AVE

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2021

City SAN ANTONIO State TX Zip Code 78212

FEC Identification Number

Purpose of Disbursement  
CONTRIBUTION

C	C00706614
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Candidate Name  
**GONZALES, ERNEST, ANTHONY TONY, , II**

Category/  
Type

Transaction ID : **SB23.I33966**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
 Disbursement For: 2022  Primary  General  Other (specify) ▼  
 State: TX District: 35

1000.00
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Memo Item

### B.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

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

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Memo Item

### C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

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

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Memo Item

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

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

1000.00
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23000.00
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