

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 POLICE OFFICERS DEFENSE ALLIANCE LLC

ADDRESS (number and street) 4712 El Presidente Dr LAS VEGAS NV 89129

2. FEC IDENTIFICATION NUMBER C C00667865 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 04 / 01 / 2018 through 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. Pollock, Kecia, Marie, , Type or Print Name of Treasurer

Signature of Treasurer Pollock, Kecia, Marie, , [Electronically Filed] Date 07 / 14 / 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.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

POLICE OFFICERS DEFENSE ALLIANCE LLC

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" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="100.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="327442.00"/>	<input type="text" value="327542.00"/>
(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="327542.00"/>	<input type="text" value="327542.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="308816.36"/>	<input type="text" value="308851.36"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="18725.64"/>	<input type="text" value="18725.64"/>
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

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Page 3

Write or Type Committee Name

POLICE OFFICERS DEFENSE ALLIANCE LLC

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2018 To: M M / D D / Y Y Y Y 06 / 30 / 2018

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).....	3170.00	3170.00
(ii) Unitemized	324272.00	324372.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	327442.00	327542.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	327442.00	327542.00
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)).....▶	327442.00	327542.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	327442.00	327542.00

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	308816.36	308851.36
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	308816.36	308851.36
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)) ..	308816.36	308851.36
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	308816.36	308851.36

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)	327442.00	327542.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	327442.00	327542.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	308816.36	308851.36
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	308816.36	308851.36

**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 25
(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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. ANDERSON, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1214 TURNBRIDGE RD
 City CHARLOTTE State NC Zip Code 28226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEGAL SECRETARY Occupation (for Individual) BANK AMERICA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 05 / 28 / 2018
Transaction ID : SA11AI-61223
 Amount of Each Receipt this Period 100.00
 Memo Item

B. ANDERSON, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1214 TURNBRIDGE RD
 City CHARLOTTE State NC Zip Code 28226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEGAL SECRETARY Occupation (for Individual) BANK AMERICA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 06 / 18 / 2018
Transaction ID : SA11AI-56703
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BARAN, ANDRIY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 99 GERMAINE DR
 City NORTH ATTLEBORO State MA Zip Code 02760
 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 ▼ 200.00

Date of Receipt 05 / 28 / 2018
Transaction ID : SA11AI-60117
 Amount of Each Receipt this Period 100.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. BARAN, ANDRIY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 99 GERMAINE DR
 City NORTH ATTLEBORO State MA Zip Code 02760
 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 ▼ 200.00

Date of Receipt 06 / 18 / 2018
Transaction ID : SA11AI-56661
 Amount of Each Receipt this Period 100.00
 Memo Item

B. CHERRY, JIM W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10833 TIMBERGROVE LN
 City CORPUS CHRISTI State TX Zip Code 78410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 25 / 2018
Transaction ID : SA11AI-67891
 Amount of Each Receipt this Period 250.00
 Memo Item

C. JAITHER, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 928
 City PELL CITY State AL Zip Code 35125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 26 / 2018
Transaction ID : SA11AI-68867
 Amount of Each Receipt this Period 300.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LOTT, ELBERT H, , ,

Mailing Address 13678 US HIGHWAY 59 N

City VICTORIA	State TX	Zip Code 77905
------------------	-------------	-------------------

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 ▼
250.00

Date of Receipt

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

Transaction ID : SA11AI-69523

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LUNDGREN, DALE, , ,

Mailing Address 311 WALNUT ST

City BATAVIA	State IL	Zip Code 60510
-----------------	-------------	-------------------

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 ▼
320.00

Date of Receipt

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

Transaction ID : SA11AI-67765

Amount of Each Receipt this Period
320.00

Memo Item

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

Mailing Address 639 WILBUR CT

City GURNEE	State IL	Zip Code 60031
----------------	-------------	-------------------

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

Name of Employer (for Individual) Management	Occupation (for Individual) Wintrust Wealth Management
---	---

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		26		2018

Transaction ID : SA11AI-69045

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	820.00
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"/> 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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. SHOEMAKER, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 WALNUT ALY
 STE 1
 City NEW CUMBERLAND State PA Zip Code 17070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELFEMPLOYED Occupation (for Individual) JRS Web Design
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 26 / 2018
Transaction ID : SA11AI-70235
 Amount of Each Receipt this Period 300.00
 Memo Item

B. TEMAR, JIMMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6120 VILLAGE CENTER AVE
 APT 301
 City WEST CHESTER State OH Zip Code 45069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) GPL INC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 25 / 2018
Transaction ID : SA11AI-67885
 Amount of Each Receipt this Period 300.00
 Memo Item

C. DEIGHTON, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2360 VALLEY WAY
 City SNELLVILLE State GA Zip Code 30078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) UNAVAILABLE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 28 / 2018
Transaction ID : SA11AI-60865
 Amount of Each Receipt this Period 300.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. FOWLER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2281 STUTTGART DR
 City FRISCO State TX Zip Code 75033
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2018
Transaction ID : SA11AI-67081
 Amount of Each Receipt this Period
 300.00
 Memo Item

B. HELMS, JAMES M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6308 E COUNTY ROAD 85
 City MIDLAND State TX Zip Code 79706
 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 ▼ 200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2018
Transaction ID : SA11AI-68607
 Amount of Each Receipt this Period
 200.00
 Memo Item

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

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	3170.00

**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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. Pollock, William, , ,		Date of Disbursement MM / DD / YYYY 05 / 15 / 2018	
Mailing Address 7134 White Blanket Crt		FEC Identification Number C [REDACTED] Transaction ID : SB21B-11133 Amount of Each Disbursement this Period 7923.00	
City North Las Vegas	State NV	Zip Code 89084	Category/ Type [REDACTED]
Purpose of Disbursement		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Pollock, Kecia, , ,		Date of Disbursement MM / DD / YYYY 05 / 15 / 2018	
Mailing Address 7134 White Blanket Crt		FEC Identification Number C [REDACTED] Transaction ID : SB21B-11135 Amount of Each Disbursement this Period 7923.00	
City North Las Vegas	State NV	Zip Code 89084	Category/ Type [REDACTED]
Purpose of Disbursement		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Pollock, William, , ,		Date of Disbursement MM / DD / YYYY 05 / 21 / 2018	
Mailing Address 7134 White Blanket Crt		FEC Identification Number C [REDACTED] Transaction ID : SB21B-11127 Amount of Each Disbursement this Period 1382.44	
City North Las Vegas	State NV	Zip Code 89084	Category/ Type [REDACTED]
Purpose of Disbursement		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	17228.44
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. Pollock, William, , ,		Date of Disbursement MM / DD / YYYY 05 / 25 / 2018	
Mailing Address 7134 White Blanket Crt		FEC Identification Number C [REDACTED] Transaction ID : SB21B-11137 Amount of Each Disbursement this Period [REDACTED] 461.75	
City North Las Vegas	State NV	Zip Code 89084	Category/ Type [REDACTED]
Purpose of Disbursement		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Pollock, Kecia, , ,		Date of Disbursement MM / DD / YYYY 05 / 25 / 2018	
Mailing Address 7134 White Blanket Crt		FEC Identification Number C [REDACTED] Transaction ID : SB21B-11139 Amount of Each Disbursement this Period [REDACTED] 4164.50	
City North Las Vegas	State NV	Zip Code 89084	Category/ Type [REDACTED]
Purpose of Disbursement		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. American Technology Services LLC		Date of Disbursement MM / DD / YYYY 05 / 04 / 2018	
Mailing Address 125 North 2nd Street Unit 110 Box 241		FEC Identification Number C [REDACTED] Transaction ID : SB21B-1107! Amount of Each Disbursement this Period [REDACTED] 14031.68	
City Phoenix	State AZ	Zip Code 85250	Category/ Type [REDACTED]
Purpose of Disbursement		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 18657.93
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. American Technology Services LLC			Date of Disbursement MM / DD / YYYY 05 / 08 / 2018	
Mailing Address 125 North 2nd Street Unit 110 Box 241			FEC Identification Number C [] Transaction ID : SB21B-11077 Amount of Each Disbursement this Period [] 34116.07	
City Phoenix	State AZ	Zip Code 85250	Category/ Type []	
Purpose of Disbursement		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. American Technology Services LLC			Date of Disbursement MM / DD / YYYY 05 / 23 / 2018	
Mailing Address 125 North 2nd Street Unit 110 Box 241			FEC Identification Number C [] Transaction ID : SB21B-11071 Amount of Each Disbursement this Period [] 2769.92	
City Phoenix	State AZ	Zip Code 85250	Category/ Type []	
Purpose of Disbursement		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) C. American Technology Services LLC			Date of Disbursement MM / DD / YYYY 05 / 24 / 2018	
Mailing Address 125 North 2nd Street Unit 110 Box 241			FEC Identification Number C [] Transaction ID : SB21B-1107: Amount of Each Disbursement this Period [] 18442.24	
City Phoenix	State AZ	Zip Code 85250	Category/ Type []	
Purpose of Disbursement		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			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 55328.23
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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. American Technology Services LLC			Date of Disbursement MM / DD / YYYY 05 / 30 / 2018	
Mailing Address 125 North 2nd Street Unit 110 Box 241			FEC Identification Number C [] Transaction ID : SB21B-11069 Amount of Each Disbursement this Period 2769.92	
City Phoenix	State AZ	Zip Code 85250	Memo Item <input type="checkbox"/>	
Purpose of Disbursement		Category/ Type []	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. American Technology Services LLC			Date of Disbursement MM / DD / YYYY 06 / 13 / 2018	
Mailing Address 125 North 2nd Street Unit 110 Box 241			FEC Identification Number C [] Transaction ID : SB21B-11067 Amount of Each Disbursement this Period 35603.20	
City Phoenix	State AZ	Zip Code 85250	Memo Item <input type="checkbox"/>	
Purpose of Disbursement		Category/ Type []	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. American Technology Services LLC			Date of Disbursement MM / DD / YYYY 06 / 21 / 2018	
Mailing Address 125 North 2nd Street Unit 110 Box 241			FEC Identification Number C [] Transaction ID : SB21B-11066 Amount of Each Disbursement this Period 9071.04	
City Phoenix	State AZ	Zip Code 85250	Memo Item <input type="checkbox"/>	
Purpose of Disbursement		Category/ Type []	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	47444.16
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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. American Technology Services LLC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 125 North 2nd Street
Unit 110 Box 241

M M M	/	D D D	/	Y Y Y Y Y
06		28		2018

City Phoenix State AZ Zip Code 85250

FEC Identification Number

Purpose of Disbursement

C	Transaction ID : SB21B-11063
Amount of Each Disbursement this Period	
6073.12	

Candidate Name

Category/
Type

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

Memo Item

B. Bank of America

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 100 North Tryon Street

M M M	/	D D D	/	Y Y Y Y Y
05		04		2018

City Charlotte State NC Zip Code 28255

FEC Identification Number

Purpose of Disbursement

C	Transaction ID : SB21B-11119
Amount of Each Disbursement this Period	
30.00	

Candidate Name

Category/
Type

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

Memo Item

C. Bank of America

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 100 North Tryon Street

M M M	/	D D D	/	Y Y Y Y Y
05		04		2018

City Charlotte State NC Zip Code 28255

FEC Identification Number

Purpose of Disbursement

C	Transaction ID : SB21B-1112:
Amount of Each Disbursement this Period	
30.00	

Candidate Name

Category/
Type

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

Memo Item

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

6133.12

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

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**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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. Bank of America		Date of Disbursement MM / DD / YYYY 05 / 23 / 2018	
Mailing Address 100 North Tryon Street		FEC Identification Number C [] Transaction ID : SB21B-11117 Amount of Each Disbursement this Period [] 30.00	
City Charlotte	State NC	Zip Code 28255	Category/ Type []
Purpose of Disbursement		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Bank of America		Date of Disbursement MM / DD / YYYY 05 / 23 / 2018	
Mailing Address 100 North Tryon Street		FEC Identification Number C [] Transaction ID : SB21B-11121 Amount of Each Disbursement this Period [] 30.00	
City Charlotte	State NC	Zip Code 28255	Category/ Type []
Purpose of Disbursement		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Bank of America		Date of Disbursement MM / DD / YYYY 05 / 23 / 2018	
Mailing Address 100 North Tryon Street		FEC Identification Number C [] Transaction ID : SB21B-1112! Amount of Each Disbursement this Period [] 30.00	
City Charlotte	State NC	Zip Code 28255	Category/ Type []
Purpose of Disbursement		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 90.00
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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. Bank of America		Date of Disbursement MM / DD / YYYY 06 / 30 / 2018	
Mailing Address 100 North Tryon Street		FEC Identification Number C [] Transaction ID : SB21B-11145 Amount of Each Disbursement this Period [] 228.00	
City 100 North Tryon Street	State NC	Zip Code 28255	Category/ Type []
Purpose of Disbursement		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: District:
Full Name (Last, First, Middle Initial) B. C. Terry Raben LTD.		Date of Disbursement MM / DD / YYYY 05 / 02 / 2018	
Mailing Address 3140 S. Rainbow Blvd.#403		FEC Identification Number C [] Transaction ID : SB21B-11129 Amount of Each Disbursement this Period [] 600.00	
City Las Vegas	State NV	Zip Code 89146	Category/ Type []
Purpose of Disbursement		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: District:
Full Name (Last, First, Middle Initial) C. Catur Consulting LLC		Date of Disbursement MM / DD / YYYY 05 / 08 / 2018	
Mailing Address 5090 Barrington Cir		FEC Identification Number C [] Transaction ID : SB21B-11111 Amount of Each Disbursement this Period [] 300.00	
City Sarasota	State FL	Zip Code 34234	Category/ Type []
Purpose of Disbursement		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: District:
SUBTOTAL of Disbursements This Page (optional)..... ▶		[] 1128.00	
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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. Catur Consulting LLC		Date of Disbursement MM / DD / YYYY 06 / 22 / 2018
Mailing Address 5090 Barrington Cir		FEC Identification Number C [] Transaction ID : SB21B-1111 Amount of Each Disbursement this Period [] 3795.00
City Sarasota	State FL	Zip Code 34234
Purpose of Disbursement	Category/ Type []	
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) B. Compliance Consultants LLC		Date of Disbursement MM / DD / YYYY 05 / 04 / 2018
Mailing Address 1345 Jefferson St. #454		FEC Identification Number C [] Transaction ID : SB21B-11091 Amount of Each Disbursement this Period [] 19915.76
City Milwaukee	State WI	Zip Code 53020
Purpose of Disbursement	Category/ Type []	
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. Compliance Consultants LLC		Date of Disbursement MM / DD / YYYY 05 / 23 / 2018
Mailing Address 1345 Jefferson St. #454		FEC Identification Number C [] Transaction ID : SB21B-11087 Amount of Each Disbursement this Period [] 3931.33
City Milwaukee	State WI	Zip Code 53020
Purpose of Disbursement	Category/ Type []	
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 27642.09
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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. Compliance Consultants LLC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1345 Jefferson St.
#454

M M M	/	D D D	/	Y Y Y Y Y
05		24		2018

City Milwaukee State WI Zip Code 53020

FEC Identification Number

Purpose of Disbursement

C

Candidate Name

Transaction ID : SB21B-11089

Amount of Each Disbursement this Period

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

7338.05

Memo Item

B. Compliance Consultants LLC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1345 Jefferson St.
#454

M M M	/	D D D	/	Y Y Y Y Y
05		30		2018

City Milwaukee State WI Zip Code 53020

FEC Identification Number

Purpose of Disbursement

C

Candidate Name

Transaction ID : SB21B-11085

Amount of Each Disbursement this Period

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

3931.33

Memo Item

C. Compliance Consultants LLC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1345 Jefferson St.
#454

M M M	/	D D D	/	Y Y Y Y Y
06		13		2018

City Milwaukee State WI Zip Code 53020

FEC Identification Number

Purpose of Disbursement

C

Candidate Name

Transaction ID : SB21B-1108:

Amount of Each Disbursement this Period

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

50533.61

Memo Item

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

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

61802.99

**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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. Compliance Consultants LLC		Date of Disbursement MM / DD / YYYY 06 / 21 / 2018	
Mailing Address 1345 Jefferson St. #454		FEC Identification Number C [] Transaction ID : SB21B-11081 Amount of Each Disbursement this Period 12874.98	
City Milwaukee	State WI	Zip Code 53020	Category/Type []
Purpose of Disbursement		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. Compliance Consultants LLC		Date of Disbursement MM / DD / YYYY 06 / 28 / 2018	
Mailing Address 1345 Jefferson St. #454		FEC Identification Number C [] Transaction ID : SB21B-11079 Amount of Each Disbursement this Period 8619.81	
City Milwaukee	State WI	Zip Code 53020	Category/Type []
Purpose of Disbursement		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) C. Cox Communications		Date of Disbursement MM / DD / YYYY 05 / 07 / 2018	
Mailing Address 6205-B Peachtree Dunwoody Road NE		FEC Identification Number C [] Transaction ID : SB21B-11131 Amount of Each Disbursement this Period 745.37	
City Atlanta	State GA	Zip Code 30328	Category/Type []
Purpose of Disbursement		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		

SUBTOTAL of Disbursements This Page (optional).....▶	22240.16
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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address 500 Staples Drive

City Framingham State MA Zip Code 01702

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 06 / 2018

FEC Identification Number

C
Transaction ID : SB21B-11115
 Amount of Each Disbursement this Period
 548.81

Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Data Services LLC

Mailing Address 1350 W. Southport Road
Box 130

City Indianapolis State TN Zip Code 46217

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2018

FEC Identification Number

C
Transaction ID : SB21B-11109
 Amount of Each Disbursement this Period
 6789.90

Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Data Services LLC

Mailing Address 1350 W. Southport Road
Box 130

City Indianapolis State TN Zip Code 46217

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2018

FEC Identification Number

C
Transaction ID : SB21B-1110:
 Amount of Each Disbursement this Period
 1341.60

Memo Item

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

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

8680.31

**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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial)

A. Unified Data Services LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		24		2018

Mailing Address 1350 W. Southport Road
Box 130

City Indianapolis State TN Zip Code 46217

FEC Identification Number

C []
Transaction ID : SB21B-11105
 Amount of Each Disbursement this Period
 [] 7581.60

Purpose of Disbursement

[]
 Category/
 Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Data Services LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		24		2018

Mailing Address 1350 W. Southport Road
Box 130

City Indianapolis State TN Zip Code 46217

FEC Identification Number

C []
Transaction ID : SB21B-11107
 Amount of Each Disbursement this Period
 [] 3841.50

Purpose of Disbursement

[]
 Category/
 Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Data Services LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		30		2018

Mailing Address 1350 W. Southport Road
Box 130

City Indianapolis State TN Zip Code 46217

FEC Identification Number

C []
Transaction ID : SB21B-11095
 Amount of Each Disbursement this Period
 [] 292.50

Purpose of Disbursement

[]
 Category/
 Type

Candidate Name

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

Memo Item

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

[] 11715.60

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

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**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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. Unified Data Services LLC		Date of Disbursement MM / DD / YYYY 05 / 30 / 2018
Mailing Address 1350 W. Southport Road Box 130		FEC Identification Number C Transaction ID : SB21B-11101 Amount of Each Disbursement this Period 1341.60
City Indianapolis	State TN Zip Code 46217	
Purpose of Disbursement	Category/Type	Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Unified Data Services LLC		Date of Disbursement MM / DD / YYYY 06 / 13 / 2018
Mailing Address 1350 W. Southport Road Box 130		FEC Identification Number C Transaction ID : SB21B-11097 Amount of Each Disbursement this Period 16933.80
City Indianapolis	State TN Zip Code 46217	
Purpose of Disbursement	Category/Type	Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Unified Data Services LLC		Date of Disbursement MM / DD / YYYY 06 / 21 / 2018
Mailing Address 1350 W. Southport Road Box 130		FEC Identification Number C Transaction ID : SB21B-1109! Amount of Each Disbursement this Period 4387.50
City Indianapolis	State TN Zip Code 46217	
Purpose of Disbursement	Category/Type	Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	22662.90
TOTAL This Period (last page this line number only).....▶	

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<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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. Unified Data Services LLC		Date of Disbursement MM / DD / YYYY 06 / 28 / 2018
Mailing Address 1350 W. Southport Road Box 130		FEC Identification Number C Transaction ID : SB21B-11093 Amount of Each Disbursement this Period 2936.70
City Indianapolis	State TN Zip Code 46217	
Purpose of Disbursement	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:	Category/Type	

Full Name (Last, First, Middle Initial) B. United States Treasury		Date of Disbursement MM / DD / YYYY 05 / 15 / 2018
Mailing Address 1500 Pennsylvania Avenue NW		FEC Identification Number C Transaction ID : SB21B-11147 Amount of Each Disbursement this Period 2107.00
City Washington	State DC Zip Code 20003	
Purpose of Disbursement	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:	Category/Type	

Full Name (Last, First, Middle Initial) C. United States Treasury		Date of Disbursement MM / DD / YYYY 05 / 15 / 2018
Mailing Address 1500 Pennsylvania Avenue NW		FEC Identification Number C Transaction ID : SB21B-11148 Amount of Each Disbursement this Period 2107.00
City Washington	State DC Zip Code 20003	
Purpose of Disbursement	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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	7150.70
TOTAL This Period (last page this line number only).....▶	

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

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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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. United States Treasury

Full Name (Last, First, Middle Initial)

Mailing Address 1500 Pennsylvania Avenue
NW

City Washington State DC Zip Code 20003

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement: MM / DD / YYYY
05 / 25 / 2018

FEC Identification Number: C

Transaction ID : SB21B-11151

Amount of Each Disbursement this Period: 38.25

Memo Item

B. United States Treasury

Full Name (Last, First, Middle Initial)

Mailing Address 1500 Pennsylvania Avenue
NW

City Washington State DC Zip Code 20003

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement: MM / DD / YYYY
05 / 25 / 2018

FEC Identification Number: C

Transaction ID : SB21B-11153

Amount of Each Disbursement this Period: 835.50

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	<input type="text"/> 873.75
TOTAL This Period (last page this line number only).....▶	<input type="text"/> 308778.38