

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**
ANN PAC

ADDRESS (number and street) **P.O. Box 3535**
 Check if different than previously reported. (ACC) **Ballwin MO 63022**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00531764 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Allen, Robert, Michael , ,
Type or Print Name of Treasurer

Signature of Treasurer *Allen, Robert, Michael , ,* [Electronically Filed] Date / /

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)

Write or Type Committee Name

ANN PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>		32778.75
(b) Cash on Hand at Beginning of Reporting Period.....	32449.70	
(c) Total Receipts (from Line 19)	46000.00	95500.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	78449.70	128278.75
7. Total Disbursements (from Line 31).....	73423.41	122001.87
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	5026.29	6276.88
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

ANN 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).....	15000.00	35000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	15000.00	35000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	31000.00	60500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	46000.00	95500.00
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)).....▶	46000.00	95500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	46000.00	95500.00

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	38923.41	69001.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	38923.41	69001.87
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	34500.00	53000.00
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)) ..	73423.41	122001.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	73423.41	122001.87

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	46000.00	95500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	46000.00	95500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	38923.41	69001.87
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	38923.41	69001.87

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

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

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
ANN PAC

A. RINEY, PAULA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1156 HIGHLAND POINTE DRIVE
 City SAINT LOUIS State MO Zip Code 63131-1408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) COMMUNITY VOLUNTEER
 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 / 08 / 2019
Transaction ID : SA11A.11377
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

B. RINEY, RODGER, O., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1156 HIGHLAND POINTE DRIVE
 City SAINT LOUIS State MO Zip Code 63131-1408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) T.D. AMERITRADE Occupation (for Individual) ADVISOR TO 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 / 08 / 2019
Transaction ID : SA11A.10138
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

C. SINQUEFIELD, REX, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 244 BENT WALNUT LANE
 City WESTPHALIA State MO Zip Code 65085-2022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A 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
 06 / 20 / 2019
Transaction ID : SA11A.12378
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	15000.00

**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 25
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ANN PAC

A. AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMI
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1061 AMERICAN LANE

City SCHAUMBURG	State IL	Zip Code 60173-4973
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FEC ID number of contributing federal political committee. **C** C00255752

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2019

Transaction ID : SA11C.12379

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

B. CMR POLITICAL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 2485

City SPRINGFIELD	State VA	Zip Code 22152-0485
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FEC ID number of contributing federal political committee. **C** C00469429

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2019

Transaction ID : SA11C.11239

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

C. COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1701 JFK BLVD, 49TH FLOOR

City ONE COMCAST CENTER	State PA	Zip Code 19103-2855
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FEC ID number of contributing federal political committee. **C** C00248716

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	/	20	/	2019

Transaction ID : SA11C.11238

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 25
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ANN PAC

A. ELECTING MAJORITY MAKING EFFECTIVE REPUBLICANS

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

Mailing Address PO BOX 183

City ANOKA	State MN	Zip Code 55303-0183
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FEC ID number of contributing federal political committee. **C** C00592089

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 06 / 20 / 2019
Transaction ID : SA11C.11237

Amount of Each Receipt this Period: 2000.00

Memo Item CONTRIBUTION

B. FIRST IN FREEDOM PAC

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

Mailing Address 824 S MILLEDGE AVE, STE 101

City ATHENS	State GA	Zip Code 30605-1332
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FEC ID number of contributing federal political committee. **C** C00540146

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 06 / 20 / 2019
Transaction ID : SA11C.11235

Amount of Each Receipt this Period: 2500.00

Memo Item CONTRIBUTION

C. INNOVATION POLITICAL ACTION 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
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FEC ID number of contributing federal political committee. **C** C00540187

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 05 / 08 / 2019
Transaction ID : SA11C.10139

Amount of Each Receipt this Period: 5000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	9500.00
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 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)
ANN PAC

A. MORTGAGE BANKERS ASSOCIATION (MORPAC) POLITICAL ACTION COMMI
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1919 M STREET NW
5TH FLOOR

City WASHINGTON State DC Zip Code 20036-3572

FEC ID number of contributing federal political committee. **C** C00004812

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2019

Transaction ID : SA11C.12380

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. NATIONAL ASSOCIATION OF REALTORS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 430 NORTH MICHIGAN AVENUE

City CHICAGO State IL Zip Code 60611-4011

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 24 / 2019

Transaction ID : SA11C.11240

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. POINT PAC, INC.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 420304

City ATLANTA State GA Zip Code 30342-0304

FEC ID number of contributing federal political committee. **C** C00632893

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
06 / 20 / 2019

Transaction ID : SA11C.11236

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8000.00
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 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)
ANN PAC

A. THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE

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

Mailing Address 1155 F STREET, NW
SUITE 400

City WASHINGTON State DC Zip Code 20004-1346

FEC ID number of contributing federal political committee. **C** C00284885

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2019

Transaction ID : SA11C.12381

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 / 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

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	31000.00

**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)
ANN PAC

Full Name (Last, First, Middle Initial) A. 9SEVEN CONSULTING, LLC		Date of Disbursement MM / DD / YYYY 06 / 08 / 2019
Mailing Address 499 S. CAPITOL ST NSW STE 405		FEC Identification Number C [] Transaction ID : SB21B.I7366
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement COMPLIANCE CONSULTING		Amount of Each Disbursement this Period [] 150.00
Candidate Name		Category/Type []
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. CAPITAL ENHANCEMENT, INC.		Date of Disbursement MM / DD / YYYY 05 / 14 / 2019
Mailing Address 150 LONG RD STE 50		FEC Identification Number C [] Transaction ID : SB21B.I7342
City CHESTERFIELD	State MO	Zip Code 63005-1239
Purpose of Disbursement ADMINISTRATIVE CONSULTING		Amount of Each Disbursement this Period [] 2000.00
Candidate Name		Category/Type []
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. CAPITAL ENHANCEMENT, INC.		Date of Disbursement MM / DD / YYYY 04 / 23 / 2019
Mailing Address 150 LONG RD STE 50		FEC Identification Number C [] Transaction ID : SB21B.I7506
City CHESTERFIELD	State MO	Zip Code 63005-1239
Purpose of Disbursement ADMINISTRATIVE CONSULTING		Amount of Each Disbursement this Period [] 500.00
Candidate Name		Category/Type 001
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).....▶	[] 2650.00
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)
ANN PAC

Full Name (Last, First, Middle Initial)

A. COMMERCE BANK CREDIT CARDS

Mailing Address PO BOX 808009

City KANSAS CITY State MO Zip Code 64180-8009

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 05 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I7335
Amount of Each Disbursement this Period
2126.84

Memo Item

Full Name (Last, First, Middle Initial)

B. AMTRAK

Mailing Address 50 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002-4214

Purpose of Disbursement
TRAVEL

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 15 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I7433
Amount of Each Disbursement this Period
173.00

Memo Item

Full Name (Last, First, Middle Initial)

C. AMTRAK

Mailing Address 50 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002-4214

Purpose of Disbursement
TRAVEL

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I7436
Amount of Each Disbursement this Period
247.00

Memo Item

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

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

2126.84

**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)
ANN PAC

Full Name (Last, First, Middle Initial)

A. AMTRAK

Mailing Address 50 MASSACHUSETTS AVE NE

City
WASHINGTON

State
DC

Zip Code
20002-4214

Purpose of Disbursement
TRAVEL

002
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	28	/	2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I7437

Amount of Each Disbursement this Period

[REDACTED] - 140.00

Memo Item

Full Name (Last, First, Middle Initial)

B. LEROS POINT TO POINT

Mailing Address 400 COLUMBUS AVE SUITE 160E

City
VALHALLA

State
NY

Zip Code
10595

Purpose of Disbursement
TRAVEL

002
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	01	/	2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I7439

Amount of Each Disbursement this Period

[REDACTED] 185.60

Memo Item

Full Name (Last, First, Middle Initial)

C. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DR

City
DALLAS

State
TX

Zip Code
75235-1908

Purpose of Disbursement
TRAVEL

002
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	22	/	2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I7434

Amount of Each Disbursement this Period

[REDACTED] 324.98

Memo Item

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

[REDACTED] 0.00

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)
ANN PAC

A. SOUTHWEST AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 2702 LOVE FIELD DR

City DALLAS State TX Zip Code 75235-1908

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 26 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I7435

Amount of Each Disbursement this Period: 658.98

Memo Item

B. SOUTHWEST AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 2702 LOVE FIELD DR

City DALLAS State TX Zip Code 75235-1908

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 14 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I7440

Amount of Each Disbursement this Period: 300.98

Memo Item

C. UNITED AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 233 S. WACKER DRIVE

City CHICAGO State IL Zip Code 60606-7147

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 01 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I7438

Amount of Each Disbursement this Period: 376.30

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)
ANN PAC

Full Name (Last, First, Middle Initial)

A. COMMERCE BANK CREDIT CARDS

Mailing Address PO BOX 808009

City KANSAS CITY State MO Zip Code 64180-8009

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 20 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I7336
Amount of Each Disbursement this Period
7623.75

Memo Item

Full Name (Last, First, Middle Initial)

B. COMMERCE BANKSHARES, INC.

Mailing Address 14317 MANCHESTER RD

City BALLWIN State MO Zip Code 63011-4048

Purpose of Disbursement
BANK FEE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 13 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I7450
Amount of Each Disbursement this Period
29.00

Memo Item

Full Name (Last, First, Middle Initial)

C. COMMERCE BANKSHARES, INC.

Mailing Address 14317 MANCHESTER RD

City BALLWIN State MO Zip Code 63011-4048

Purpose of Disbursement
BANK FEE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 13 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I7451
Amount of Each Disbursement this Period
72.30

Memo Item

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

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

7623.75

**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)
ANN PAC

A. TAO RESTAURANT VEGAS

Full Name (Last, First, Middle Initial)

Mailing Address 3355 LAS VEGAS BLVD. SOUTH

City LAS VEGAS State NV Zip Code 89109-8941

Purpose of Disbursement TRAVEL

002
Category/Type

Candidate Name

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

Date of Disbursement
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2019

FEC Identification Number
C
Transaction ID : SB21B.I7441
 Amount of Each Disbursement this Period
 398.82

Memo Item

B. WYNN HOTEL

Full Name (Last, First, Middle Initial)

Mailing Address 3131 S LAS VEGAS BLVD

City LAS VEGAS State NV Zip Code 89109

Purpose of Disbursement TRAVEL

002
Category/Type

Candidate Name

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

Date of Disbursement
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2019

FEC Identification Number
C
Transaction ID : SB21B.I7442
 Amount of Each Disbursement this Period
 3056.26

Memo Item

C. WYNN HOTEL

Full Name (Last, First, Middle Initial)

Mailing Address 3131 S LAS VEGAS BLVD

City LAS VEGAS State NV Zip Code 89109

Purpose of Disbursement TRAVEL

002
Category/Type

Candidate Name

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

Date of Disbursement
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2019

FEC Identification Number
C
Transaction ID : SB21B.I7443
 Amount of Each Disbursement this Period
 4067.37

Memo Item

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

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

0.00

**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)
ANN PAC

Full Name (Last, First, Middle Initial) A. COMMERCE BANKSHARES, INC.		Date of Disbursement MM / DD / YYYY 04 / 30 / 2019
Mailing Address 14317 MANCHESTER RD		FEC Identification Number C [] Transaction ID : SB21B.I7339
City BALLWIN	State MO	Zip Code 63011-4048
Purpose of Disbursement BANK FEE		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 5.00
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. COMMERCE BANKSHARES, INC.		Date of Disbursement MM / DD / YYYY 05 / 31 / 2019
Mailing Address 14317 MANCHESTER RD		FEC Identification Number C [] Transaction ID : SB21B.I7340
City BALLWIN	State MO	Zip Code 63011-4048
Purpose of Disbursement BANK FEES		Category/Type []
Candidate Name		Amount of Each Disbursement this Period 5.00
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. COMMERCE BANKSHARES, INC.		Date of Disbursement MM / DD / YYYY 06 / 28 / 2019
Mailing Address 14317 MANCHESTER RD		FEC Identification Number C [] Transaction ID : SB21B.I7341
City BALLWIN	State MO	Zip Code 63011-4048
Purpose of Disbursement BANK FEE		Category/Type []
Candidate Name		Amount of Each Disbursement this Period 5.00
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)..... ▶

15.00

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)
ANN PAC

A. CRIMSON

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL RD
SUITE 400

City VIENNA State VA Zip Code 22182

Purpose of Disbursement DATA PROCESSING SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 10 / 2019

FEC Identification Number: C
Transaction ID : SB21B.I7360
Amount of Each Disbursement this Period: 250.00

Memo Item

B. CRIMSON

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL RD
SUITE 400

City VIENNA State VA Zip Code 22182

Purpose of Disbursement DATA PROCESSING SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 13 / 2019

FEC Identification Number: C
Transaction ID : SB21B.I7361
Amount of Each Disbursement this Period: 250.00

Memo Item

C. CRIMSON

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL RD
SUITE 400

City VIENNA State VA Zip Code 22182

Purpose of Disbursement DATA PROCESSING SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 12 / 2019

FEC Identification Number: C
Transaction ID : SB21B.I7362
Amount of Each Disbursement this Period: 250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 750.00

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)
ANN PAC

Full Name (Last, First, Middle Initial) A. GULA GRAHAM GROUP		Date of Disbursement MM / DD / YYYY 05 / 10 / 2019
Mailing Address 499 S CAPITOL ST SW STE 420		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I7363 Amount of Each Disbursement this Period 500.00
City WASHINGTON	State DC	Zip Code 20003-4027
Purpose of Disbursement FUNDRAISING		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. GULA GRAHAM GROUP		Date of Disbursement MM / DD / YYYY 05 / 10 / 2019
Mailing Address 499 S CAPITOL ST SW STE 420		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I7364 Amount of Each Disbursement this Period 1100.00
City WASHINGTON	State DC	Zip Code 20003-4027
Purpose of Disbursement FUNDRAISING		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) C. GULA GRAHAM GROUP		Date of Disbursement MM / DD / YYYY 04 / 04 / 2019
Mailing Address 499 S CAPITOL ST SW STE 420		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I7365 Amount of Each Disbursement this Period 24157.82
City WASHINGTON	State DC	Zip Code 20003-4027
Purpose of Disbursement FUNDRAISING		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	

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

25757.82

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

38923.41

**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)
ANN PAC

A. BRIAN FITZPATRICK FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 939

M M M	/	D D D	/	Y Y Y Y Y
05		24		2019

City LANGHORNE State PA Zip Code 19047

FEC Identification Number

Purpose of Disbursement
CAMPAIGN CONTRIBUTION

C	C00607416
---	-----------

Candidate Name
FITZPATRICK, BRIAN, , ,

Category/
Type

Transaction ID : SB23.I7354

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: PA District: 08

Amount of Each Disbursement this Period	1000.00
---	---------

Memo Item

B. COMMITTEE TO ELECT STEVE WATKINS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 6021 SW 29TH STREET
SUITE A, BOX 150

M M M	/	D D D	/	Y Y Y Y Y
06		20		2019

City TOPEKA State KS Zip Code 66614

FEC Identification Number

Purpose of Disbursement
CAMPAIGN CONTRIBUTION

C	C00660050
---	-----------

Candidate Name
WATKINS, STEVE, , ,

Category/
Type

Transaction ID : SB23.I7358

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: KS District: 02

Amount of Each Disbursement this Period	2000.00
---	---------

Memo Item

C. DON BACON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. BOX 391368

M M M	/	D D D	/	Y Y Y Y Y
05		24		2019

City OMAHA State NE Zip Code 68139

FEC Identification Number

Purpose of Disbursement
CAMPAIGN CONTRIBUTION

C	C00575167
---	-----------

Candidate Name
BACON, DON, , CONGRESSMA,

Category/
Type

Transaction ID : SB23.I7352

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: NE District: 02

Amount of Each Disbursement this Period	1000.00
---	---------

Memo Item

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

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

Amount of Each Disbursement this Period	4000.00
---	---------

Amount of Each Disbursement this Period	
---	--

**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)
ANN PAC

A. FRIENDS OF SCOTT TIPTON

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX M

City
CORTEZ

State
CO

Zip Code
81321

Purpose of Disbursement
CAMPAIGN CONTRIBUTION

Candidate Name

TIPTON, SCOTT, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB23.I7355

Amount of Each Disbursement this Period

[REDACTED] 1000.00

Memo Item

B. HANDEL FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

Mailing Address 3085 ROXBURGH DRIVE

City
ROSWELL

State
GA

Zip Code
30076

Purpose of Disbursement
CAMPAIGN CONTRIBUTION

Candidate Name

HANDEL, KAREN , CHRISTINE, ,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify)

State: GA District: 06

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2019

FEC Identification Number

C C00633362

Transaction ID : SB23.I7344

Amount of Each Disbursement this Period

[REDACTED] 2500.00

Memo Item

C. HURD FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 761029

City
SAN ANTONI

State
TX

Zip Code
78245-6029

Purpose of Disbursement
CAMPAIGN CONTRIBUTION

Candidate Name

HURD, WILLIAM, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: TX District: 23

Date of Disbursement

MM / DD / YYYY
05 / 24 / 2019

FEC Identification Number

C C00545467

Transaction ID : SB23.I7351

Amount of Each Disbursement this Period

[REDACTED] 1000.00

Memo Item

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

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

[REDACTED] 4500.00

[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 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)
ANN PAC

Full Name (Last, First, Middle Initial) A. JAIME FOR CONGRESS		Date of Disbursement MM / DD / YYYY 05 / 24 / 2019
Mailing Address PO BOX 1614		FEC Identification Number C00472704 Transaction ID : SB23.I7367 Amount of Each Disbursement this Period 1000.00
City RIDGEFIELD	State WA	Zip Code 98642-0020
Purpose of Disbursement CAMPAIGN CONTRIBUTION		Category/Type
Candidate Name HERRERA BEUTLER, JAIME, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WA	District: 03	

Full Name (Last, First, Middle Initial) B. JOAN PERRY FOR CONGRESS		Date of Disbursement MM / DD / YYYY 04 / 17 / 2019
Mailing Address PO BOX 97275		FEC Identification Number C00698530 Transaction ID : SB23.I7343 Amount of Each Disbursement this Period 2500.00
City RALEIGH	State NC	Zip Code 27624
Purpose of Disbursement CAMPAIGN CONTRIBUTION		Category/Type
Candidate Name PERRY, JOAN, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC	District: 03	

Full Name (Last, First, Middle Initial) C. JOAN PERRY FOR CONGRESS		Date of Disbursement MM / DD / YYYY 05 / 16 / 2019
Mailing Address PO BOX 97275		FEC Identification Number C00698530 Transaction ID : SB23.I7345 Amount of Each Disbursement this Period 2500.00
City RALEIGH	State NC	Zip Code 27624
Purpose of Disbursement CAMPAIGN CONTRIBUTION		Category/Type
Candidate Name PERRY, JOAN, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary Runoff	
State: NC	District: 03	

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

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

6000.00

**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 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)
ANN PAC

A. JOHN CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)
ANN PAC

Date of Disbursement: MM / DD / YYYY
05 / 24 / 2019

Mailing Address: U.S. HOUSE OF REPRESENTATIVES
409 CANNON HOUSE OFFICE BUILDING

City: WASHINGTON State: DC Zip Code: 20515

Purpose of Disbursement: CAMPAIGN CONTRIBUTION

Candidate Name: CARTER, JOHN, R., , REP.

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: TX District: 31

FEC Identification Number: C00371203
Transaction ID: SB23.I7346
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. KATKO FOR CONGRESS

Full Name (Last, First, Middle Initial)
KATKO FOR CONGRESS

Date of Disbursement: MM / DD / YYYY
05 / 24 / 2019

Mailing Address: 5407 ANVIL DRIVE

City: CAMILLUS State: NY Zip Code: 13031

Purpose of Disbursement: CAMPAIGN CONTRIBUTION

Candidate Name: KATKO, JOHN, M, ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: NY District: 24

FEC Identification Number: C00556365
Transaction ID: SB23.I7350
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. MCCAUL FOR CONGRESS, INC

Full Name (Last, First, Middle Initial)
MCCAUL FOR CONGRESS, INC

Date of Disbursement: MM / DD / YYYY
05 / 24 / 2019

Mailing Address: 815-A BRAZOS ST
PMB 230

City: AUSTIN State: TX Zip Code: 78701-2514

Purpose of Disbursement: CAMPAIGN CONTRIBUTION

Candidate Name: MCCAUL, MICHAEL, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: TX District: 10

FEC Identification Number: C00392688
Transaction ID: SB23.I7349
Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3000.00

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)
ANN PAC

Full Name (Last, First, Middle Initial)
A. NICOLE FOR NEW YORK

Mailing Address PO BOX 60487

City: STATEN ISLAND State: NY Zip Code: 10306

Purpose of Disbursement
CAMPAIGN CONTRIBUTION

Candidate Name
MALLIOTAKIS, NICOLE, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: NY District: 11

Date of Disbursement
MM / DD / YYYY
06 / 20 / 2019

FEC Identification Number

C C00694778

Transaction ID : **SB23.I7359**
Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. OLSON FOR CONGRESS COMMITTEE

Mailing Address PO BOX 16381

City: SUGAR LAND State: TX Zip Code: 77496-6381

Purpose of Disbursement
CAMPAIGN CONTRIBUTION

Candidate Name
OLSON, PETER, G., ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: TX District: 22

Date of Disbursement
MM / DD / YYYY
05 / 24 / 2019

FEC Identification Number

C C00437913

Transaction ID : **SB23.I7348**
Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. UPTON FOR ALL OF US

Mailing Address 285 RIDGEWAY

City: ST. JOSEPH State: MI Zip Code: 49085

Purpose of Disbursement
CAMPAIGN CONTRIBUTION

Candidate Name
UPTON, FREDERICK , STEPHEN, ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: MI District: 06

Date of Disbursement
MM / DD / YYYY
05 / 24 / 2019

FEC Identification Number

C C00200584

Transaction ID : **SB23.I7347**
Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

4000.00

**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 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)
ANN PAC

A. YOUNG KIM FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 2186

M M M	/	D D D	/	Y Y Y Y Y
06		11		2019

City FULLERTON State CA Zip Code 92837

FEC Identification Number

Purpose of Disbursement
CAMPAIGN CONTRIBUTION

C	C00665638
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Candidate Name
KIM, YOUNG, , ,

Category/
Type

Transaction ID : SB23.I7356

Amount of Each Disbursement this Period

Office Sought: House Senate President
State: CA District: 39

Disbursement For: 2020
 Primary General
 Other (specify) ▼

2000.00

Memo Item

B. ZELDIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 47 FLINTLOCK DRIVE

M M M	/	D D D	/	Y Y Y Y Y
05		24		2019

City SHIRLEY State NY Zip Code 11967

FEC Identification Number

Purpose of Disbursement
CAMPAIGN CONTRIBUTION

C	C00439505
---	-----------

Candidate Name
ZELDIN, LEE, , ,

Category/
Type

Transaction ID : SB23.I7353

Amount of Each Disbursement this Period

Office Sought: House Senate President
State: NY District: 01

Disbursement For: 2020
 Primary General
 Other (specify) ▼

1000.00

Memo Item

C. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE (NRCC)

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 320 FIRST STREET SE

M M M	/	D D D	/	Y Y Y Y Y
06		20		2019

City WASHINGTON State DC Zip Code 20003-1838

FEC Identification Number

Purpose of Disbursement
CONTRIBUTION

C	
---	--

Candidate Name

Category/
Type

Transaction ID : SB23.I7531

Amount of Each Disbursement this Period

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

10000.00

Memo Item

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

13000.00

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

34500.00
