

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

STELLA2020

ADDRESS (number and street)

3109 WEST 50TH STREET

#126

Check if different than previously reported. (ACC)

MINNEAPOLIS

MN

55410

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00709493

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

MN

05

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)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y 2019

through

M M /

D D /

Y Y Y Y 2019

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

Curtis, Elizabeth, , ,

Type or Print Name of Treasurer

Curtis, Elizabeth, , ,

Signature of Treasurer

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y 2019

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

Office Use Only

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**STELLA2020**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	45104.32	45104.32
(b) Total Contribution Refunds (from Line 20(d)) .....	3111.19	3111.19
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	41993.13	41993.13
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	19093.79	19093.79
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	19093.79	19093.79
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	22899.34	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	

**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 3 (Revised 05/2016)

Write or Type Committee Name

STELLA2020

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	11541.03	11541.03
(ii) Unitemized .....	33563.29	33563.29
(iii) TOTAL of contributions from individuals .....	45104.32	45104.32
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	45104.32	45104.32
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	45104.32	45104.32

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	19093.79	19093.79
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	3111.19	3111.19
(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 20(a), (b), and (c)).....	3111.19	3111.19
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	22204.98	22204.98

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	45104.32
25. SUBTOTAL (add Line 23 and Line 24).....	45104.32
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	22204.98
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	22899.34

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

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

FOR LINE NUMBER: PAGE 5 OF 17  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**STELLA2020**

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

Mailing Address PO Box 2004

City Martinsville State TX Zip Code 24115

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

Name of Employer Worth Finance Corp Occupation Officer

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2019

Transaction ID : SA11AI.5873

Amount of Each Receipt this Period  
 519.52

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Elliott, David, , ,**

Mailing Address 6621 Talmadge Ln.

City Dallas State TX Zip Code 75230

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

Name of Employer retired Occupation retired

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 25 / 2019

Transaction ID : SA11AI.5014

Amount of Each Receipt this Period  
 2800.00

Memo Item

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

Mailing Address 11 Dodge Drive

City West Hartford State CT Zip Code 06107

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

Name of Employer retired Occupation retired

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2019

Transaction ID : SA11AI.4122

Amount of Each Receipt this Period  
 250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3569.52

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 6 OF 17	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**STELLA2020**

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

Mailing Address 25 Mountainview Blvd

City Basking Ridge State NJ Zip Code 07920

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

Name of Employer World Media Occupation Manager

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
08 / 18 / 2019

Transaction ID : SA11AI.4144

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Group, The Knight, , ,**

Mailing Address

City State Zip Code

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

Name of Employer Knight Group Occupation Global Environmental Consulting

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
259.92

Date of Receipt  
07 / 13 / 2019

Transaction ID : SA11AI.5927

Amount of Each Receipt this Period  
259.92

Memo Item  
Could not verify organization; refunded via donation portal

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

Mailing Address 8136 E Cortez Dr

City Scottsdale State AZ Zip Code 85260

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

Name of Employer retired Occupation retired

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
09 / 20 / 2019

Transaction ID : SA11AI.5205

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1509.92
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 7 OF 17  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**STELLA2020**

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

Mailing Address 14600 State Route 65

City Jackson Center State OH Zip Code 45334

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

Name of Employer Rising Sun Express Occupation Owner

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2019

Transaction ID : SA11AI.4739

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Merkin, Stan, , ,**

Mailing Address 2336 SE OCEAN BLVD # 368

City Stuart State FL Zip Code 34996

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

Name of Employer retired Occupation retired

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2019

Transaction ID : SA11AI.4632

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item

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

Mailing Address 16148 N Dale Wade Ave

City Gardendale State TX Zip Code 79758

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

Name of Employer Team Oil Tools Occupation Operations Manager

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 208.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 18 / 2019

Transaction ID : SA11AI.6264

Amount of Each Receipt this Period  
 \_\_\_\_\_ 208.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ \_\_\_\_\_ 708.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 17  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**STELLA2020**

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

Mailing Address 4707 N Foxglove Dr NW

City Gig Harbor State WA Zip Code 98332

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

Name of Employer retired Occupation retired

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 22 / 2019

Transaction ID : SA11AI.5483

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Rotan, Elizabeth, , ,**

Mailing Address 413 LONGWOODS LN

City Houston State TX Zip Code 77024

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

Name of Employer retired Occupation retired

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2019

Transaction ID : SA11AI.5056

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item

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

Mailing Address 28 Buckingham Drive

City Egg Harbor Township State NJ Zip Code 08009

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 208.30

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2019

Transaction ID : SA11AI.6275

Amount of Each Receipt this Period  
 \_\_\_\_\_ 104.15

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ \_\_\_\_\_ 604.15

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



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

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

FOR LINE NUMBER: PAGE 9 OF 17  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**STELLA2020**

**A.** Full Name (Last, First, Middle Initial)  
**smead, larry, , ,**  
 Mailing Address 2857 essex rd  
 City Essex State NY Zip Code 12936  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer sasco Occupation ceo  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 26 / 2019  
**Transaction ID : SA11AI.4214**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Stieber, Gregory, , ,**  
 Mailing Address 723 Carpenter Rd  
 City Alexandria State VA Zip Code 22314  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Private Occupation Law Enforcement Consultant  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2019  
**Transaction ID : SA11AI.5609**  
 Amount of Each Receipt this Period  
 220.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Sutliff, Gregory, , ,**  
 Mailing Address 700 Creek Rd  
 City Camp Hill State PA Zip Code 17011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer retired Occupation retired  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 18 / 2019  
**Transaction ID : SA11AI.4235**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1470.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 10 OF 17  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**STELLA2020**

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

Mailing Address 20309 Turner Court

City Sonora State CA Zip Code 95370

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

Name of Employer retired Occupation retired

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 18 / 2019

**Transaction ID : SA11AI.5418**

Amount of Each Receipt this Period  
2800.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Waldrop, Michelle, , ,**

Mailing Address PO box 305

City Mountain Home State AR Zip Code 72654

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

Name of Employer Self Occupation Physician

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
259.92

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 01 / 2019

**Transaction ID : SA11AI.6031**

Amount of Each Receipt this Period  
259.92

Memo Item

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

Mailing Address 1730 Covington Dr

City Auburn State AL Zip Code 36830

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

Name of Employer Self Occupation Entrepreneur

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
519.52

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 14 / 2019

**Transaction ID : SA11AI.5919**

Amount of Each Receipt this Period  
519.52

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3579.44

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)  
**STELLA2020**

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

Mailing Address 1535 High St

City Boulder State CO Zip Code 80304

FEC ID number of contributing federal political committee. C

Name of Employer retired Occupation retired

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

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

Transaction ID : SA11AI.5159

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-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 (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	11541.03

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 17			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**STELLA2020**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2019
Mailing Address PO Box 619616		FEC Identification Number C
City DFW Airport	State TX	Zip Code 75261
Purpose of Disbursement Airfare	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 310.50	
Office Sought: <input 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) ▼	Transaction ID : SB17.6324 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Blakeslee, Randall, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2019
Mailing Address 3109 W 50th St		FEC Identification Number C
City Minneapolis	State MN	Zip Code 55410
Purpose of Disbursement Marketing Services	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 500.00	
Office Sought: <input 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) ▼	Transaction ID : SB17.6339 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Budget Car Rental</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2019
Mailing Address 6j Sylvan Way		FEC Identification Number C
City Parsippany	State NJ	Zip Code 07054
Purpose of Disbursement Transportation	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 319.58	
Office Sought: <input 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) ▼	Transaction ID : SB17.6321 <input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1130.08
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 17			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**STELLA2020**

Full Name (Last, First, Middle Initial) <b>A. Capital Square Funding Group</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2019		
Mailing Address PO Box 10853			FEC Identification Number C		
City Raleigh	State NC	Zip Code 27605	Amount of Each Disbursement this Period 1440.50		
Purpose of Disbursement Fundraising Commission		Category/ Type	Transaction ID : SB17.6287		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input 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: District:					

Full Name (Last, First, Middle Initial) <b>B. Crown Plaza Hotel</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2019		
Mailing Address 1605 Broadway			FEC Identification Number C		
City New York	State NY	Zip Code 10019	Amount of Each Disbursement this Period 415.86		
Purpose of Disbursement Lodging		Category/ Type	Transaction ID : SB17.6317		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input 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: District:					

Full Name (Last, First, Middle Initial) <b>C. Delta Air</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2019		
Mailing Address PO Box 20706			FEC Identification Number C		
City Atlanta	State GA	Zip Code 30320	Amount of Each Disbursement this Period 312.00		
Purpose of Disbursement Airfare		Category/ Type	Transaction ID : SB17.6319		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input 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: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2168.36
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 17			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**STELLA2020**

Full Name (Last, First, Middle Initial) <b>A. Delta Air</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2019		
Mailing Address PO Box 20706			FEC Identification Number C		
City Atlanta	State GA	Zip Code 30320	Amount of Each Disbursement this Period 225.30		
Purpose of Disbursement Airfare		Category/ Type	Transaction ID : SB17.6323		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input 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: District:					

Full Name (Last, First, Middle Initial) <b>B. Delta Air</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2019		
Mailing Address PO Box 20706			FEC Identification Number C		
City Atlanta	State GA	Zip Code 30320	Amount of Each Disbursement this Period 135.30		
Purpose of Disbursement Airfare		Category/ Type	Transaction ID : SB17.6326		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input 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: District:					

Full Name (Last, First, Middle Initial) <b>c. Rightside Lists</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2019		
Mailing Address PO Box 10853			FEC Identification Number C		
City Raleigh	State NC	Zip Code 27605	Amount of Each Disbursement this Period 8643.00		
Purpose of Disbursement Online Fundraising Fees		Category/ Type	Transaction ID : SB17.6285		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input 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: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9003.60
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 17			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**STELLA2020**

Full Name (Last, First, Middle Initial) <b>A. Southern Jack Strategies</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2019		
Mailing Address 11 Balmoral Dr					
City Niceville	State FL	Zip Code 32578	FEC Identification Number C		
Purpose of Disbursement Campaign Manager Services		Category/ Type	Amount of Each Disbursement this Period 1500.00		
Candidate Name		Transaction ID : SB17.6340			
Office Sought: <input 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) ▼		<input type="checkbox"/> Memo Item		
State: _____ District: _____					

Full Name (Last, First, Middle Initial) <b>B. Southern Jack Strategies</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2019		
Mailing Address 11 Balmoral Dr					
City Niceville	State FL	Zip Code 32578	FEC Identification Number C		
Purpose of Disbursement Campaign Manager Services		Category/ Type	Amount of Each Disbursement this Period 1000.00		
Candidate Name		Transaction ID : SB17.6345			
Office Sought: <input 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) ▼		<input type="checkbox"/> Memo Item		
State: _____ District: _____					

Full Name (Last, First, Middle Initial) <b>C. Southern Jack Strategies</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2019		
Mailing Address 11 Balmoral Dr					
City Niceville	State FL	Zip Code 32578	FEC Identification Number C		
Purpose of Disbursement Campaign Manager Services		Category/ Type	Amount of Each Disbursement this Period 500.00		
Candidate Name		Transaction ID : SB17.6346			
Office Sought: <input 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) ▼		<input type="checkbox"/> Memo Item		
State: _____ District: _____					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3000.00
<b>TOTAL</b> This Period (last page this line number only).....	3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 17			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**STELLA2020**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. Stripe</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>30</td> <td></td> <td>2019</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	09		30		2019
M M	/	D D	/	Y Y Y Y									
09		30		2019									
Mailing Address 510 Townsend St		FEC Identification Number											
City San Francisco	State CA	Zip Code 94103	<b>C</b>										
Purpose of Disbursement Payment Processing Fees		Amount of Each Disbursement this Period											
Candidate Name		443.28											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Transaction ID : <b>SB17.6299</b>											
Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item											
State: _____	District: _____												

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>B. Stripe</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>30</td> <td></td> <td>2019</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	09		30		2019
M M	/	D D	/	Y Y Y Y									
09		30		2019									
Mailing Address 510 Townsend St		FEC Identification Number											
City San Francisco	State CA	Zip Code 94103	<b>C</b>										
Purpose of Disbursement Payment Processing Fees		Amount of Each Disbursement this Period											
Candidate Name		1408.19											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Transaction ID : <b>SB17.6300</b>											
Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item											
State: _____	District: _____												

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>C.</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M	/	D D	/	Y Y Y Y					
M M	/	D D	/	Y Y Y Y									
Mailing Address		FEC Identification Number											
City	State	Zip Code	<b>C</b>										
Purpose of Disbursement		Amount of Each Disbursement this Period											
Candidate Name		<input type="checkbox"/> Memo Item											
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: _____												

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1851.47
<b>TOTAL</b> This Period (last page this line number only).....▶	17153.51



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 17			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**STELLA2020**

Full Name (Last, First, Middle Initial) <b>A. Group, The Knight, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2019
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement Contribution Refunded from potentially prohibited source		Amount of Each Disbursement this Period 259.92
Candidate Name		Transaction ID : SB20A.6352
Office Sought: <input 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) ▼	<input type="checkbox"/> Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Taylor, Grant, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2019
Mailing Address 20309 Turner Court		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period 2800.00
Candidate Name		Transaction ID : SB20A.6290
Office Sought: <input 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) ▼	<input type="checkbox"/> Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Transaction ID
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) ▼	<input type="checkbox"/> Memo Item
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3059.92
<b>TOTAL</b> This Period (last page this line number only).....▶	3059.92