

# 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**  
**NEW JOURNEY PAC, INC.**

ADDRESS (number and street) **499 S CAPITOL ST SW**  
**STE 405**  
 Check if different than previously reported. (ACC) **WASHINGTON DC 20003-4018**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00709691** 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.  
DATWYLER, THOMAS, , ,  
Type or Print Name of Treasurer

Signature of Treasurer DATWYLER, THOMAS, , , [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)

Page 2

Write or Type Committee Name

**NEW JOURNEY PAC, INC.**

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="2020"/>	<input type="text" value="7425.22"/>	<input type="text" value="7425.22"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="89940.11"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="216046.21"/>	<input type="text" value="1148040.14"/>
(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="305986.32"/>	<input type="text" value="1155465.36"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="225696.11"/>	<input type="text" value="1074675.15"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="80290.21"/>	<input type="text" value="80790.21"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="324838.24"/>	

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

**NEW JOURNEY PAC, INC.**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2020 To: M M / D D / Y Y Y Y 07 / 31 / 2020

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).....	75011.50	297902.90
(ii) Unitemized .....	141033.98	848973.48
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	216045.48	1146876.38
(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) .....	216045.48	1146876.38
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).....	0.73	1163.76
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)).....▶	216046.21	1148040.14
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	216046.21	1148040.14

**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 .....	225686.11	955161.99
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	225686.11	955161.99
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	111241.16
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 .....	10.00	8272.00
(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)).....	10.00	8272.00
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)) ..	225696.11	1074675.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	225696.11	1074675.15

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	216045.48	1146876.38
34. Total Contribution Refunds (from Line 28(d)) .....	10.00	8272.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	216035.48	1138604.38
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	225686.11	955161.99
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.73	1163.76
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	225685.38	953998.23

**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 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**NEW JOURNEY PAC, INC.**

**A. ADDISON, STEVE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13625 POWERLINE AVENUE  
 City HOBE SOUND State FL Zip Code 33455-9775  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ADDISON DRYWALL, INC. Occupation (for Individual) CONTRACTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 20 / 2020  
**Transaction ID : ADD414530CD9344ACB64**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. ADLER, ELIZABETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1460 UNIVERSITY AVE  
 City SAN JOSE State CA Zip Code 95126-1639  
 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 ▼ 2150.00

Date of Receipt 07 / 28 / 2020  
**Transaction ID : A314D822DBA1D443091A**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. AGOSTINO, SHELLEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9075 SUNSET LN NW  
 City SEABECK State WA Zip Code 98380-9531  
 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 07 / 14 / 2020  
**Transaction ID : AE17D51536C0F46758A4**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	650.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 146
	<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)  
**NEW JOURNEY PAC, INC.**

**A. AUVIL, STEVEN, R, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6247 SAUTERNE DRIVE

City MACUNGIE	State PA	Zip Code 18062-8802
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		10		2020

**Transaction ID : A8E2A7CBD6EF24072AAE**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. BACA, RAYMUNDO, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9901 TRINIDAD DR

City EL PASO	State TX	Zip Code 79925-6073
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MONTERREY LTD	Occupation (for Individual) CPM
--	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		07		2020

**Transaction ID : ADAEA6DBCBB9F4179ACI**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. BADER, NYLA, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 145 CYGNET PL

City LONG LAKE	State MN	Zip Code 55356
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2020

**Transaction ID : A9EE241D33CB04CE6922**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	800.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 146
	<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)  
**NEW JOURNEY PAC, INC.**

**A. BAKER, JOHNNY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9121 ELIZABETH RD

City HOUSTON	State TX	Zip Code 77055
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOHN H BAKER INVESTORS	Occupation (for Individual) PRESIDENT
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2020

**Transaction ID : AE6D810343B584D68B37**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. BEAIRD, MARTHA, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6408 WILLIAMS PARKWAY

City DALLAS	State TX	Zip Code 75205-1717
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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 ▼  
5600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2020

**Transaction ID : AD33FB1A39EEF491185E**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 6408 WILLIAMS PARKWAY

City DALLAS	State TX	Zip Code 75205-1717
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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 ▼  
5850.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2020

**Transaction ID : AE1C99D1CC1AE482A874**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

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

Mailing Address 5136 ELDER ROAD

City HYDES	State MD	Zip Code 21082-9550
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BR DERM PA	Occupation (for Individual) PRESIDENT
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		06		2020

**Transaction ID : A4E690C46CE3345C587A**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. BERNSTEIN, BENJAMIN, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5136 ELDER ROAD

City HYDES	State MD	Zip Code 21082-9550
---------------	-------------	------------------------

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

Name of Employer (for Individual) BR DERM PA	Occupation (for Individual) PRESIDENT
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		08		2020

**Transaction ID : AECBCD04AB49F44898EA**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. BERT, CAROL, L, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2813 JACANA CT

City LONGWOOD	State FL	Zip Code 32779
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CERTIFIED FINANCE GROUP	Occupation (for Individual) PART OWNER
--	---

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
07		08		2020

**Transaction ID : A3DBC582568784F6897B**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	375.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 146
	<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)  
**NEW JOURNEY PAC, INC.**

**A. BEST, HARRIETTE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4311 MARKWOOD LN  
 City FAIRFAX State VA Zip Code 22033-3639  
 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 07 / 28 / 2020  
**Transaction ID : A8478887F07FC405D83B**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. BIRDSONG, GEORGE, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1400  
 City SUFFOLK State VA Zip Code 23439-1400  
 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 07 / 13 / 2020  
**Transaction ID : AF81BE3D8D4E34F0CA63**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. BOOTH, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18806 WIMBLEDON CIR  
 City LUTZ State FL Zip Code 33558-5300  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ABI COMPANIES INC. Occupation (for Individual) CONSTRUCTION  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 15 / 2020  
**Transaction ID : A2A0F4BA05C354E77B90**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. BOSS, RONALD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13202 WORD OF LIFE DRIVE #154  
 City HUDSON State FL Zip Code 34669-2466  
 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 ▼ 253.00

Date of Receipt 07 / 08 / 2020  
**Transaction ID : A556AFB09731E4892800**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. BOSS, RONALD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13202 WORD OF LIFE DRIVE #154  
 City HUDSON State FL Zip Code 34669-2466  
 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 ▼ 278.00

Date of Receipt 07 / 12 / 2020  
**Transaction ID : AC6256C7E5D2245B7BAE**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. BRINSTER, LESLIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12849 49TH ST SW  
 City BELFIELD State ND Zip Code 58622-9216  
 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 07 / 13 / 2020  
**Transaction ID : AE6E3B51DF7FE42C09D6**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 125.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 146
	<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	

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)  
**NEW JOURNEY PAC, INC.**

**A. BRODIE, RENTON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17138 RIVER BLUFF DRIVE PO BOX 96  
 City UNION PIER State MI Zip Code 49129-0096  
 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 ▼ 450.00

Date of Receipt 07 / 09 / 2020  
**Transaction ID : A6FC1D87A72124EB89C6**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. BROWN, GARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10717 , OREGON AVENUE OREGON AVENUE  
 City CULVER CITY State CA Zip Code 90232-3727  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HEALTHCARE Occupation (for Individual) HEALTHCARE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 09 / 2020  
**Transaction ID : AEC561DA0DE7848199CE**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. BROWN, GARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5669 W COPPERHEAD DR  
 City TUCSON State AZ Zip Code 85742-8343  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DSSVC Occupation (for Individual) SALES  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 31 / 2020  
**Transaction ID : ADA559C3E7212488CA89**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. BROWN, SIDNEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6929 BRIDLE CT  
 City KNOXVILLE State TN Zip Code 37921-2827  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 30 / 2020  
**Transaction ID : A50174F1418B74E49A3E**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. BRYDEN, ELIZABETH, M, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 W 67TH ST APT 611  
 City NEW YORK State NY Zip Code 10023-6200  
 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 ▼ 3510.00

Date of Receipt 07 / 07 / 2020  
**Transaction ID : AFDAC2780B8F04F9782C**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. BUCHWALD, JAMES, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17156 GLEN RD  
 City MOUNT VERNON State OH Zip Code 43050  
 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 ▼ 1000.00

Date of Receipt 07 / 14 / 2020  
**Transaction ID : A08331C82B238423E857**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2500.00  
**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 14 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. BUZBY, SCOTT, H, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4150 INDIAN RIVER BLVD

City VERO BEACH	State FL	Zip Code 32967-7224
--------------------	-------------	------------------------

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  

M M M	/	D D D	/	Y Y Y Y Y Y
07		06		2020

**Transaction ID : A8094DDBDD98447EAB54**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. CAMPANARO, TOM, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1208

City RANCHO SANTA FE	State CA	Zip Code 92067-1208
-------------------------	-------------	------------------------

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  

M M M	/	D D D	/	Y Y Y Y Y Y
07		07		2020

**Transaction ID : A84C06B1F8F4943A29AA**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. CAMPANARO, TOM, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1208

City RANCHO SANTA FE	State CA	Zip Code 92067-1208
-------------------------	-------------	------------------------

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  

M M M	/	D D D	/	Y Y Y Y Y Y
07		07		2020

**Transaction ID : A35C4DF029B2E4D00915**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 OF 146
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**NEW JOURNEY PAC, INC.**

**A. CANARY, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1795 MCCAULEY ROAD  
 City CLEARWATER State FL Zip Code 33765-1542  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) JEWELRY MAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 30 / 2020  
**Transaction ID : A327288EC4E594C239AB**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. CARR JR, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4616 CHRISTOPHER PL  
 City DALLAS State TX Zip Code 75204-1611  
 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 ▼ 3750.00

Date of Receipt 07 / 06 / 2020  
**Transaction ID : AE07B2BCE893941608A6**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. CARR JR, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4616 CHRISTOPHER PL  
 City DALLAS State TX Zip Code 75204-1611  
 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 ▼ 4250.00

Date of Receipt 07 / 20 / 2020  
**Transaction ID : A557711BC68C04B67B1F**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1550.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 OF 146
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**NEW JOURNEY PAC, INC.**

**A. CATON, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 270 QUILL AVE  
 City THE VILLAGES State FL Zip Code 32162-5034  
 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 ▼ 350.00

Date of Receipt 07 / 28 / 2020  
**Transaction ID : AC6BC3B62B9904CE5AFE**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. CERVANTES, ANNA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10802 ROSETON AVENUE  
 City SANTA FE SPRINGS State CA Zip Code 90670-4344  
 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 ▼ 225.00

Date of Receipt 07 / 20 / 2020  
**Transaction ID : A67325BFAF63949B59C9**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. CHELTON, LOUIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 80 RIVERSHYRE CIR  
 City LAWRENCEVILLE State GA Zip Code 30043-6436  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SSA Occupation (for Individual) PHYSICIAN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 20 / 2020  
**Transaction ID : A90A52D8F716B4C25A78**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	525.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. CHRISTENSEN, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2067 E PHEASANT CIR  
 City HOLLADAY State UT Zip Code 84121-1341  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SECURITYNATIONAL Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 14 / 2020  
**Transaction ID : A161C4949160541E1B04**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**B. CHRISTENSEN, MITCH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 88 SMITH GAGE RD  
 City SMITH State NV Zip Code 89430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 07 / 2020  
**Transaction ID : A4C0B9EB6B8294F86BFF**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. CORUM, SARAH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3258 DUNCAN AV  
 City CLOVIS State CA Zip Code 93619-5006  
 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 07 / 20 / 2020  
**Transaction ID : A61CFA99105FC469CBD2**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 146
	<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)  
**NEW JOURNEY PAC, INC.**

**A. CREWS, BILL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4319 STUART AVE  
 City RICHMOND State VA Zip Code 23221-1828  
 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 ▼ 450.00

Date of Receipt 07 / 20 / 2020  
**Transaction ID : A598A7112F0F44404B71**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. CROCKETT, CARMEN, D, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1113 CANDELA LN  
 City GRAND LEDGE State MI Zip Code 48837-2258  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 03 / 2020  
**Transaction ID : A1A468AFD6577495281D**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. CRUICKSHANK, JERRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4523 AVERILL DR  
 City GRANTS PASS State OR Zip Code 97526-4113  
 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 ▼ 350.00

Date of Receipt 07 / 06 / 2020  
**Transaction ID : AC028E26C30D7428FBC1**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. DAMON, ALBERT, W, MR., III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 PINE HILL RD  
 City WAKEFIELD State RI Zip Code 02879-2824  
 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 07 / 03 / 2020  
**Transaction ID : A0F524BDBCDE1499284A**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**B. DAMON, ALBERT, W, MR., III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 PINE HILL RD  
 City WAKEFIELD State RI Zip Code 02879-2824  
 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 ▼ 400.00

Date of Receipt 07 / 06 / 2020  
**Transaction ID : A7599AA63BA334C26AE7**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. DAMON, ALBERT, W, MR., III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 PINE HILL RD  
 City WAKEFIELD State RI Zip Code 02879-2824  
 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 ▼ 450.00

Date of Receipt 07 / 29 / 2020  
**Transaction ID : AA1A005D62229453EBCB**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. DAVIES, DENISE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 60 VENETIAN DRIVE N205  
 City DELRAY BEACH State FL Zip Code 33483-6940  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 12 / 2020  
**Transaction ID : A338324EB157A45D983A**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. DE SAUSSURE, BARBARA, , MISS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3842 BROOKDALE BLVD  
 City CASTRO VALLEY State CA Zip Code 94546-2016  
 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 ▼ 350.00

Date of Receipt 07 / 07 / 2020  
**Transaction ID : A2CEA123161014C7BABC**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. DEATHERAGE, RAYMOND, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11 SEPTEMBER LN STAF  
 City STAFFORD State VA Zip Code 22554-6833  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RAPISCAN SYSTEMS, INC. Occupation (for Individual) ACCOUNT MANAGER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 29 / 2020  
**Transaction ID : A7D1F8C72CC684CB0872**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 146
<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)  
**NEW JOURNEY PAC, INC.**

**A. DENNELER, DANIEL, R, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 555 WALKER AVE  
 City COLBY State KS Zip Code 67701-1527  
 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 07 / 06 / 2020  
**Transaction ID : A3FB14ED0844F4AC0B22**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. DEROUSSE, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1004 MOHAWK ST  
 City CLEARWATER State FL Zip Code 33755-1832  
 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 07 / 05 / 2020  
**Transaction ID : AB805CC49BAB8437FA03**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. DESLAURIERS, ROGER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7848 1ST AVE S  
 City SAINT PETERSBURG State FL Zip Code 33707-1002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 20 / 2020  
**Transaction ID : A3D9065A4E930427B865**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. DICKINSON, SCOTT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3418 GREENWAY DRIVE  
 City JUPITER State FL Zip Code 33458-8719  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AVIATION Occupation (for Individual) TRANSPORTATION  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 07 / 05 / 2020  
**Transaction ID : A3F6B833D75884117ADF**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. DIETERLE 3, MIKE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4615 BENITO CT  
 City LAKEWOOD RANCH State FL Zip Code 34211-8523  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AMERISURE Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 28 / 2020  
**Transaction ID : AE53C3622E3B44974B36**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. DOTINGA, JAMES, W, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4026 SALTSRING DR  
 City FERNDALE State WA Zip Code 98248-9538  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) LAWN TRASH CARE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 07 / 07 / 2020  
**Transaction ID : A2042ACBDB7CC475F9DC**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	175.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. DOWDY, JERRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2650 WESTON RD  
 City SCOTTS VALLEY State CA Zip Code 95066-2519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) BLACKSMITH  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 07 / 29 / 2020  
**Transaction ID : A4EE7C518DAAC42CE91C**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. DOWNS, DARIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8483 PORTLAND PL  
 City MCLEAN State VA Zip Code 22102-1730  
 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 ▼ 4000.00

Date of Receipt 07 / 20 / 2020  
**Transaction ID : AAD3F1DFF643C4195B54**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. DREYER, WILLIAM E., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 IRONWOOD ROAD  
 City SAN ANTONIO State TX Zip Code 78212-2540  
 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 ▼ 350.00

Date of Receipt 07 / 20 / 2020  
**Transaction ID : AE20A36D338F44FED9D5**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. DRUMMOND, A, CAROLINE, MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 266 RICE BLUFF RD

City PAWLEYS ISL	State SC	Zip Code 29585-7971
---------------------	-------------	------------------------

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  

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2020

**Transaction ID : AE15101F4B1C04EDE985**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 212 W SUNSET DR

City GADSDEN	State AL	Zip Code 35904-3235
-----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) CAREPROVIDER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		11		2020

**Transaction ID : A42A232B2CC8A4684816**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 752 GOLDEN HILL RD

City CORNWALLVILLE	State NY	Zip Code 12418-1207
-----------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		23		2020

**Transaction ID : AB86A00EDA6F64F56AF4**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. DYER, BILL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16A JOURNEY STE 150  
 City ALISO VIEJO State CA Zip Code 92656-5376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HCP NATIONAL Occupation (for Individual) INSURANCE BROKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 07 / 2020  
**Transaction ID : AA31D450AE2764C398CF**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. ELKINS, EVA P, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10375 WILSHIRE BLVD,9G  
 City LOS ANGELES State CA Zip Code 90024-4750  
 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 ▼ 400.00

Date of Receipt 07 / 28 / 2020  
**Transaction ID : A7201C64BAADF4507ABE**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. ELLIOTT, TOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 845 COVINGTON RD  
 City LOS ALTOS State CA Zip Code 94024-5049  
 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 ▼ 255.00

Date of Receipt 07 / 08 / 2020  
**Transaction ID : AACF257580B084628B56**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	320.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 OF 146
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. EVANS, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10036 HEARTHSIDE PL  
 City FORT WAYNE State IN Zip Code 46804-2417  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 06 / 2020  
**Transaction ID : A367A9D74E8404F8DB8D**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. FAISON, SANDI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3920 MARLOWE ST  
 City WEST UNIVERSITY PLACE State TX Zip Code 77005-2046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) WIFE/MOM  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 29 / 2020  
**Transaction ID : A31715E7667AD46E4872**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**C. FIELDS, AMY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6210 WILLOW LN  
 City DALLAS State TX Zip Code 75230-2226  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 22 / 2020  
**Transaction ID : A3680009C552D468DB94**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1075.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 146
	<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)  
**NEW JOURNEY PAC, INC.**

**A. FITZHUGH, GRAYSON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6921 GLEN ELLYN DR  
 City LOVELAND State OH Zip Code 45140-9496  
 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 ▼ 600.00

Date of Receipt 07 / 20 / 2020  
**Transaction ID : A00FC0750F8C8451DA22**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. FOSTER, ALBERT, W, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20451 AUDETTE ST  
 City DEARBORN State MI Zip Code 48124-3907  
 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 07 / 06 / 2020  
**Transaction ID : AE363D2B1E27D49BEA10**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. FOSTER, L, RUSSELL, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 92 FREDERICK ST UNIT A  
 City SANTA CRUZ State CA Zip Code 95062  
 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 07 / 07 / 2020  
**Transaction ID : AF6EE9195640041E988B**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 146
	<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)  
**NEW JOURNEY PAC, INC.**

**A. FOUNTAIN, KEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 2149  
 City LAKE PLACID State NY Zip Code 12946-6149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TEMPEST CAPITAL LTD Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 13 / 2020  
**Transaction ID : AB60B4338A068440B852**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. FOUNTAIN, KEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 2149  
 City LAKE PLACID State NY Zip Code 12946-6149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TEMPEST CAPITAL LTD Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 20 / 2020  
**Transaction ID : A6357AAD9EF804F0288C**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. FOWLER, DEBRA, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 280  
 City COLLEGEDALE State TN Zip Code 37315  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MCKEE FOODS CORP Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 10 / 2020  
**Transaction ID : A31AC119F8469445C887**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. FOWLER, WENDY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 63007 TERRY DR  
 City BEND State OR Zip Code 97701-9341  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE APPRAISER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 29 / 2020  
**Transaction ID : AEC639152AF974A358A2**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. FRANTZ, BOULDIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7764 OLD MILL FOREST DR  
 City ROANOKE State VA Zip Code 24018-5223  
 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 07 / 07 / 2020  
**Transaction ID : A2B5C84204FE44E51A13**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. FRIERSON, PATTIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 551 PINE VALLEY ROAD SOUTHEAST  
 City MARIETTA State GA Zip Code 30067-4827  
 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 ▼ 1250.00

Date of Receipt 07 / 06 / 2020  
**Transaction ID : A9D5B77E376044F64B15**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 146
	<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)  
**NEW JOURNEY PAC, INC.**

**A. GALLAGHER, JUDITH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3979 COUNTY ROAD 826  
 City ANNA State TX Zip Code 75409-3016  
 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 ▼ 4000.00

Date of Receipt 07 / 14 / 2020  
**Transaction ID : A4BB0D0DD71CC46D1957**  
 Amount of Each Receipt this Period 4000.00  
 Memo Item

**B. GATEWOOD, ROGER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 123 BAY POINT DR NE # 74  
 City SAINT PETERSBURG State FL Zip Code 33704-3805  
 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 ▼ 1000.00

Date of Receipt 07 / 30 / 2020  
**Transaction ID : AE6C94BD8408B454B929**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. GILBERT, LAMBERT, O, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8548 VINE VALLEY DR  
 City SUN VALLEY State CA Zip Code 91352  
 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 ▼ 1000.00

Date of Receipt 07 / 07 / 2020  
**Transaction ID : A21229001FD2C4997ADC**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6000.00  
**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 31 OF 146
	<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)  
**NEW JOURNEY PAC, INC.**

**A. GISH, DOUGLAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18018 MELROSE DR  
 City BUCYRUS State KS Zip Code 66013-9090  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DELOITTE Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 21 / 2020  
**Transaction ID : AA326D14D03B6472EA01**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. GLENDINNING, ANN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 340 SOUTH US HIGHWAY ONE #408  
 City JUPITER State FL Zip Code 33477-5930  
 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 07 / 31 / 2020  
**Transaction ID : A5E4EFD8B486F4694833**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. GOODWIN, BRIDGETT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 443 ADAMS ST  
 City PLYMOUTH State MI Zip Code 48170-1211  
 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 ▼ 600.00

Date of Receipt 07 / 28 / 2020  
**Transaction ID : AC759CF023DDB4642BE6**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	800.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 146
	<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)  
**NEW JOURNEY PAC, INC.**

**A. GORRIE, M, MILLER, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 54 COUNTRY CLUB BLVD

City MOUNTAIN BRK	State AL	Zip Code 35213
----------------------	-------------	-------------------

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

Name of Employer (for Individual) BRASFIELD & GORRIE, INC.	Occupation (for Individual) CEO & CHAIRMAN
---	---

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
07		06		2020

**Transaction ID : A3DB0890C9A34404DAF7**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. GUDORF, KENNETH, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 970 CAPE MARCO DR  
UNIT 1102

City MARCO ISLAND	State FL	Zip Code 34145-6655
----------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		07		2020

**Transaction ID : ACB7B25E943CB45DF83F**

Amount of Each Receipt this Period  
500.00

Memo Item

**C. GUTHRIE, PHILIP, L, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23755 MIDDLEBELT RD

City FARMINGTON HILLS	State MI	Zip Code 48336-2903
--------------------------	-------------	------------------------

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

Name of Employer (for Individual) FORD MOTOR COMPANY	Occupation (for Individual) ENGINEER
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		06		2020

**Transaction ID : A1ADC62A0BAF648C2A96**

Amount of Each Receipt this Period  
150.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	900.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. GWARTNEY, GINGER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2604 N SPRUCE AVE  
 City ROSWELL State NM Zip Code 88201-9784  
 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 ▼ 350.00

Date of Receipt 07 / 28 / 2020  
**Transaction ID : AE4B7C2E410CA4137AC3**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. HAGGERTY-BEARDEN, GWEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3300 COUNTY FARM RD  
 City HOWELL State MI Zip Code 48843-8936  
 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 ▼ 600.00

Date of Receipt 07 / 07 / 2020  
**Transaction ID : ADA34D359A837488AB74**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. HALL, JIM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6605 S STATE HIGHWAY 349  
 City MIDLAND State TX Zip Code 79706  
 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 ▼ 1000.00

Date of Receipt 07 / 09 / 2020  
**Transaction ID : A7F91BD1FEE41446BA4F**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 34 OF 146
<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)  
**NEW JOURNEY PAC, INC.**

**A. HAMEL, JOHN, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8400 OLD FREDERICK RD  
 City ELLICOTT CITY State MD Zip Code 21043  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HAMEL BUILDERS Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 13 / 2020  
**Transaction ID : A2CCDAB52F21040138CC**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**B. HANCHARIK, KEVIN, D, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4514 HOMESTEAD DR  
 City NAZARETH State PA Zip Code 18064-8996  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ALLENTECH Occupation (for Individual) OPERATIONS MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 03 / 2020  
**Transaction ID : AA3CFD56EC3624F18935**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. HANSON, DENNIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1226 CANDLEWICK DR NW  
 City POPLAR GROVE State IL Zip Code 61065-8920  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HANSON AUTOMATION & DESIGN Occupation (for Individual) ENGINEERING  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 28 / 2020  
**Transaction ID : AF4176BF066014569A2E**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. HARDEMAN, BRYAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6757 AIRPORT BLVD  
 City AUSTIN State TX Zip Code 78752-3602  
 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 ▼ 1500.00

Date of Receipt 07 / 07 / 2020  
**Transaction ID : A84D8E3BFF3FB456DABA**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. HARRISON, SELBY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3612 LEXINGTON AVENUE  
 3612 LEXINGTON AVE  
 City DALLAS State TX Zip Code 75205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 06 / 2020  
**Transaction ID : A718F40072D764FA8935**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. HARRIS, RANDOLPH, K, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3433 MIRASOL AVE  
 City OAKLAND State CA Zip Code 94605  
 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 ▼ 645.00

Date of Receipt 07 / 03 / 2020  
**Transaction ID : AFDA88FF2974240C4BAF**  
 Amount of Each Receipt this Period 645.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2145.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 146
	<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)  
**NEW JOURNEY PAC, INC.**

**A. HAUGHT, KENNETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 316 WOODHAVEN DR  
 City MORGANTOWN State WV Zip Code 26505-3309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SAIC, INC. Occupation (for Individual) SYSTEMS ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 30 / 2020  
**Transaction ID : A205D985FA2ED4C1BB1D**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. HAUSMAN, CRAIG, R, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7110 TERRAVITA HLS  
 City HOUSTON State TX Zip Code 77069  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) POLLAN HAUSMAN Occupation (for Individual) REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 08 / 2020  
**Transaction ID : A5AA10FC3A6AC4B9789C**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. HEIFRIN, ROLLIN, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10395 MUMFORD RD  
 City BRYAN State TX Zip Code 77807-7699  
 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 07 / 03 / 2020  
**Transaction ID : A06CAA984342B421BB77**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. HEISLER, JAMES B, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1935 BROTHERS CT  
 City SAINT PETERS State MO Zip Code 63376-7844  
 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 07 / 11 / 2020  
**Transaction ID : A3497E2A90B694E4C8F4**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. HEISLER, JAMES B, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1935 BROTHERS CT  
 City SAINT PETERS State MO Zip Code 63376-7844  
 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 07 / 14 / 2020  
**Transaction ID : ABF58968FD56D4A2484F**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. HENNING, PETER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11327 LUXEMBOURG WAY  
 City SAN DIEGO State CA Zip Code 92131-2939  
 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 ▼ 600.00

Date of Receipt 07 / 20 / 2020  
**Transaction ID : AD318DC3EBCA2457BAB5**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 200.00  
**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 38 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. HERRMANN, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7114 QUAIL FIELD DR  
 City HOUSTON State TX Zip Code 77095-3222  
 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 07 / 21 / 2020  
**Transaction ID : A5EEB66CD88524F45B74**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. HESLEP, DONALD, B, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2700 WALHALA DR  
 City NORTH CHESTERFIELD State VA Zip Code 23236  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUILDER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 16 / 2020  
**Transaction ID : AFA4EC062ED7D4D68B25**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. HILLMAN, TATNALL, LEA, CAPT., SC USNR RE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 504 W BLEEKER ST  
 City ASPEN State CO Zip Code 81611-1228  
 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 ▼ 11000.00

Date of Receipt 07 / 10 / 2020  
**Transaction ID : AAA858CE7C67A4D148EC**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 146
	<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)  
**NEW JOURNEY PAC, INC.**

**A. HINESLY, SUSAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2916 ROBESON PARK DRIVE  
 City CHAMPAIGN State IL Zip Code 61822-7609  
 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 07 / 07 / 2020  
**Transaction ID : A25235E2259D84CBE87C**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. HUBBART, NANCY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3095 KEY HARBOUR DR  
 City LAKE ST LOUIS State MO Zip Code 63367-2097  
 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 ▼ 525.00

Date of Receipt 07 / 08 / 2020  
**Transaction ID : AA5C641B9DE9C45ACAA6**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. HUFFINES, MARY, CATHERINE, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3705 LEXINGTON AVE  
 City DALLAS State TX Zip Code 75205-3802  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 07 / 24 / 2020  
**Transaction ID : A2BB9E667F7864227AEC**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2125.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 146
	<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)  
**NEW JOURNEY PAC, INC.**

**A. HUSMAN, WILFRED, C, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 593  
609 REAGAN ST

City MARCUS State IA Zip Code 51035

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

Name of Employer (for Individual) MARCUS BOWL INC. Occupation (for Individual) PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
07 / 06 / 2020  
Transaction ID : **AF031E569E2E1491CAE2**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 6847 ABBOTTSWOOD DR

City RANCHO PALOS VERDES State CA Zip Code 90275-3058

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 ▼  
400.00

Date of Receipt  
07 / 06 / 2020  
Transaction ID : **A0F203CD0FD9B48FAB30**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. ISLAM, ANGE, RAE, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5584 STATE ROUTE 20A

City WARSAW State NY Zip Code 14569-9302

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  
07 / 10 / 2020  
Transaction ID : **A557C5F49214146C1B9A**

Amount of Each Receipt this Period  
50.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1150.00

**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 41 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. JACOBS, LARRY, MINER, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3270 HYDE PARK RD  
 City PENSACOLA State FL Zip Code 32503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) SELF-EMPLOYED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 13 / 2020  
**Transaction ID : A0708430F33C94710BB3**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. JENKS, NANCY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21558 FLINTSHIRE STREET  
 City CUPERTINO State CA Zip Code 95014-4716  
 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 07 / 21 / 2020  
**Transaction ID : AC95DAE99D473416DB32**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. JOHNSON, RAYMOND, O, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 495 S TAAFFE ST  
 City SUNNYVALE State CA Zip Code 94086-7627  
 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 07 / 24 / 2020  
**Transaction ID : A2A0233E4AEA24A81808**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. JOHNSTON, MERILYN, B, MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19355 CYPRESS RIDGE TER  
UNIT 1012

City LANSDOWNE State VA Zip Code 20176

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 27 / 2020

**Transaction ID : A72CDCC9030204B21855**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. KELLY, JIM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 501 OAKBROOK DRIVE

City LEWISVILLE State TX Zip Code 75057-2135

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

Name of Employer (for Individual) **UNIVERSAL DISPLAY** Occupation (for Individual) **MANUFACTURING MGMT.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 07 / 2020

**Transaction ID : A66D14D6E28824739BE4**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. KELLY, JIM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 501 OAKBROOK DRIVE

City LEWISVILLE State TX Zip Code 75057-2135

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

Name of Employer (for Individual) **UNIVERSAL DISPLAY** Occupation (for Individual) **MANUFACTURING MGMT.**

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 20 / 2020

**Transaction ID : AD76D44A4491F40669FC**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	625.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 146
	<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)  
**NEW JOURNEY PAC, INC.**

**A. KENNEDY, BERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18246 SE VILLAGE CIR  
 City TEQUESTA State FL Zip Code 33469-3402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 07 / 2020  
**Transaction ID : A7288DE9513A64E3FB9D**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. KENNEY, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3870 BRET HARTE DRIVE  
 City REDWOOD CITY State CA Zip Code 94061-1116  
 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 07 / 01 / 2020  
**Transaction ID : A883C2DC76B3A44D8943**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. KESTER, ELSIE, L, MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6002 RON KING TRL  
 City LITTLETON State CO Zip Code 80125-7601  
 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 07 / 13 / 2020  
**Transaction ID : A73A0D73A6709498FAAC**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 700.00  
**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 44 OF 146
	<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)  
**NEW JOURNEY PAC, INC.**

**A. KINNEY, LAKE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 900 E STANLEY BLVD  
 UNIT 383  
 City LIVERMORE State CA Zip Code 94550-4080  
 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 ▼ 209.00

Date of Receipt 07 / 07 / 2020  
**Transaction ID : A7769E0A74BC44AA7800**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. KISER, ROBERT, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6548 43RD ST  
 APT 1308  
 City LUBBOCK State TX Zip Code 79407-1956  
 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 ▼ 450.00

Date of Receipt 07 / 06 / 2020  
**Transaction ID : A4A592C4586D841928AB**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**C. KITTREDGE, ROBERT, M, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 622 N DARTMOUTH RD  
 City SPOKANE VALLEY State WA Zip Code 99206-3821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 03 / 2020  
**Transaction ID : A5128E5C6B7174BA9B69**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 45 OF 146
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**NEW JOURNEY PAC, INC.**

**A. KLIPPERT, SCOTT, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11613 7TH PL SE  
 City LAKE STEVENS State WA Zip Code 98258-9477  
 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 07 / 03 / 2020  
**Transaction ID : AD56C8BAC57B64CE88B2**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. KOETHER, BERNARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address STE 1074  
 City FORT LAUDERDALE State FL Zip Code 33316  
 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 ▼ 450.00

Date of Receipt 07 / 25 / 2020  
**Transaction ID : AF24B0611413B467BA1C**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. KOPTISH, ALLAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6564 CAGLIARI CT  
 City MYRTLE BEACH State SC Zip Code 29572-3386  
 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 07 / 31 / 2020  
**Transaction ID : A7D664BE6B8704CEF875**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. KRISTIANSO, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6320 E LOS SANTOS DR  
 City LONG BEACH State CA Zip Code 90815-3321  
 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 07 / 10 / 2020  
**Transaction ID : A4A487CCB6D1B4B35BE0**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. KUMLER, P, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10333 E 211TH ST  
 City NOBLESVILLE State IN Zip Code 46062-8822  
 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 07 / 15 / 2020  
**Transaction ID : A1B73C4B47D0F46B3A46**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. LAIR, ROSETTA, ALICE, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6207 FOXCROFT RD  
 City ALEXANDRIA State VA Zip Code 22307-1104  
 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 ▼ 1400.00

Date of Receipt 07 / 02 / 2020  
**Transaction ID : A05D67FF28C48498989E**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. LARSEN, ERIK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 521 SHEPHERD AVE  
 City WINTER PARK State FL Zip Code 32789-3972  
 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 07 / 03 / 2020  
**Transaction ID : A5BBC3828983F47128B8**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. LAW, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 25652 HIGHWAY 157  
 City MENLO State GA Zip Code 30731-2641  
 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 ▼ 215.00

Date of Receipt 07 / 31 / 2020  
**Transaction ID : A18AE8BE0F50F43A3AAB**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**C. LAWSON, BENNY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5441 S CLARBORNE AVE  
 City BATTLEFIELD State MO Zip Code 65619  
 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 07 / 16 / 2020  
**Transaction ID : A13298B5F18CE4152A2A**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	390.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. LEE, ALLEN, K, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4137 MEREDITH RD  
 City KNOXVILLE State TN Zip Code 37921-2805  
 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 ▼ 450.00

Date of Receipt 07 / 08 / 2020  
**Transaction ID : A7D550977F83E4A22A33**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**B. LEICHT, DONA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 875 N COAST HWY  
 City LAGUNA BEACH State CA Zip Code 92651-1415  
 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 07 / 29 / 2020  
**Transaction ID : ABA557818A18A40BC953**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. LESTE, JIM, H, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3437 VIA LOMA VISTA STE 100  
 City ESCONDIDO State CA Zip Code 92029-7724  
 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 ▼ 474.00

Date of Receipt 07 / 20 / 2020  
**Transaction ID : AC01E6DFEE8DA48D6B28**  
 Amount of Each Receipt this Period 176.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	476.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. LESTER, CATHY, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19701 N COUNTY ROAD 21  
 City ACKERLY State TX Zip Code 79713  
 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 ▼ 4000.00

Date of Receipt 07 / 10 / 2020  
**Transaction ID : A421DC391CB814B41A26**  
 Amount of Each Receipt this Period 4000.00  
 Memo Item

**B. LOOMIS, KARL, F, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 432 LYON LAKE RD  
 City MARSHALL State MI Zip Code 49068-8205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 08 / 2020  
**Transaction ID : A67F9910884944783BB1**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. LOWE, THOMAS P, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2630 W LAFAYETTE RD  
 City EXCELSIOR State MN Zip Code 55331-9417  
 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 07 / 21 / 2020  
**Transaction ID : A24F4916AF1774D9FA0B**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4350.00  
**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 50 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. LYONS, KARL, J, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20350 ALLEGRO SHORES LN  
 City HUMBLE State TX Zip Code 77346-1649  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FORGED COMPONENTS Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 22 / 2020  
**Transaction ID : A4490171659D74992A88**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. MACINNIS, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2996 WENDWOOD DR  
 City MARIETTA State GA Zip Code 30062-1417  
 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 07 / 01 / 2020  
**Transaction ID : A58B06C88AC5F4C36ACD**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. MALOOF, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 601 SHREVE ST  
 City PUNTA GORDA State FL Zip Code 33950-3332  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 09 / 2020  
**Transaction ID : A3810EA1AFB4846B0AAE**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. MALOOF, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 601 SHREVE ST  
 City PUNTA GORDA State FL Zip Code 33950-3332  
 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 ▼ 1100.00

Date of Receipt 07 / 24 / 2020  
**Transaction ID : ADE662E902368437FB36**  
 Amount of Each Receipt this Period 600.00  
 Memo Item

**B. MANTEUFFEL, ALLAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1440 CHAMPION FOREST CT  
 City WHEATON State IL Zip Code 60187  
 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 07 / 20 / 2020  
**Transaction ID : AC38E028B1DA44D6C8AF**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**C. MARINOS, JAMES, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5486 SOLEDAD RD  
 City LA JOLLA State CA Zip Code 92037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 10 / 2020  
**Transaction ID : AA87562A4C7EC4DD2892**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1150.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. MARTIN, GEORGE, H, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4218 BRITTANY PT  
 City LANSDALE State PA Zip Code 19446-6538  
 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 ▼ 350.00

Date of Receipt 07 / 23 / 2020  
**Transaction ID : A71E7A066E346464CA7B**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. MARTIN, JUDY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4311 VERSAILLES AVE  
 City DALLAS State TX Zip Code 75205-3010  
 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 ▼ 1000.00

Date of Receipt 07 / 21 / 2020  
**Transaction ID : AA5B929CCE7184BA7865**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. MARTIN, PATRICIA, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 972 EVERGREEN DRIVE  
 City DELRAY BEACH State FL Zip Code 33483-4803  
 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 ▼ 1250.00

Date of Receipt 07 / 06 / 2020  
**Transaction ID : A284CA3DACBC94D1793F**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1350.00  
**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 53 OF 146
<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)  
**NEW JOURNEY PAC, INC.**

**A. MATTEI, REBECCA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22 JARRELL FARMS DR  
 City NEWARK State DE Zip Code 19711-3063  
 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 ▼ 425.00

Date of Receipt 07 / 06 / 2020  
**Transaction ID : A8637639717A747EF838**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. MCCORD, NANCY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 928 11TH ST. 3  
 City SANTA MONICA State CA Zip Code 90403-2963  
 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 ▼ 225.00

Date of Receipt 07 / 14 / 2020  
**Transaction ID : A399F20089C894C4DACE**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. MCCORMICK, CHARLES, O, MR., III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7881 CLEARWATER COVE DR  
 City INDIANAPOLIS State IN Zip Code 46240  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INDIANA EYE CLINIC Occupation (for Individual) PHYSICIAN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 09 / 2020  
**Transaction ID : A11C13D336C8D488E802**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 146
	<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)  
**NEW JOURNEY PAC, INC.**

**A. MCCREIGHT, RICHARD, D, MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7706 ROYAL AZALEA CT

City SPRINGFIELD	State VA	Zip Code 22153-2157
---------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2020

**Transaction ID : AD1EB4D977725468F840**

Amount of Each Receipt this Period  
35.00

Memo Item

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

Mailing Address 1613 NE 6TH TER

City CAPE CORAL	State FL	Zip Code 33909-2250
--------------------	-------------	------------------------

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

Name of Employer (for Individual) LEE HEALTH	Occupation (for Individual) ATTORNEY
---	---

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
07		10		2020

**Transaction ID : A8A3FAFDF65384CD38C5**

Amount of Each Receipt this Period  
200.00

Memo Item

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

Mailing Address 1 LAKE POINT RD

City COLUMBIA	State SC	Zip Code 29206-4511
------------------	-------------	------------------------

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  

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2020

**Transaction ID : A716D51C9B1DF45F08B6**

Amount of Each Receipt this Period  
200.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	435.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. MCGREGOR, DEAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 513  
 City WILSONVILLE State OR Zip Code 97070-0513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 20 / 2020  
**Transaction ID : A8BD62D1F3B444DB891A**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. MCKIBBEN, MASON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 501 PORTOLA ROAD APT 3A  
 City PORTOLA VALLEY State CA Zip Code 94028-7689  
 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 ▼ 400.00

Date of Receipt 07 / 06 / 2020  
**Transaction ID : A037B0237C583434AB36**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. MCVANEY, CAROLE, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1201 GREEN OAKS DR  
 City GREENWOOD VILLAGE State CO Zip Code 80121  
 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 07 / 09 / 2020  
**Transaction ID : AD0471CC454FA49B9AE2**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 800.00  
**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 56 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. MEADOWS, TROY, , , JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1445  
 City PORTLAND State TX Zip Code 78374-1188  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 24 / 2020  
**Transaction ID : AF0421D2AE68B470BBCB**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. MERRICK, SUSAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1715 CATTLE DRIVE  
 City CEDAR PARK State TX Zip Code 78613-1488  
 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  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 18 / 2020  
**Transaction ID : ACDABA08D8060482986A**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. MESHBERG, SAMUEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 118VIA PALACIO  
 City PALM BEACH GARDENS State FL Zip Code 33418-6212  
 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  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 07 / 2020  
**Transaction ID : A02B5D57F111B4C27A33**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	225.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 146
	<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)  
**NEW JOURNEY PAC, INC.**

**A. MILLER, CHERYL, L, MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6574 PERSIMMON WAY

City LIBERTYVILLE	State IL	Zip Code 60048-9476
----------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2020

**Transaction ID : A0F237F58527C46B2BCD**

Amount of Each Receipt this Period  
150.00

Memo Item

**B. MILLS, NAN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22 TRENT DR

City SAINT LOUIS	State MO	Zip Code 63124-1033
---------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2020

**Transaction ID : AE8408F3E28DC4B319A9**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. MINCKS, JAY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19001 CRESCENT SPRINGS DR

City KINGWOOD	State TX	Zip Code 77339-3802
------------------	-------------	------------------------

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

Name of Employer (for Individual) INSPERITY	Occupation (for Individual) EXECUTIVE
--	--

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
07		21		2020

**Transaction ID : A5E9E008CFC064166B0F**

Amount of Each Receipt this Period  
250.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. MOELLER, GEORGE, E, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 406 LAKEVIEW RD  
 APT 3

City WINTER GARDEN State FL Zip Code 34787-3046

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 ▼  
 225.00

Date of Receipt  
 07 / 07 / 2020

Transaction ID : ACC6EA5A91BE14F6BA2C

Amount of Each Receipt this Period  
 50.00

Memo Item

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

Mailing Address PO BOX 20153

City WICKENBURG State AZ Zip Code 85358-5153

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 ▼  
 265.00

Date of Receipt  
 07 / 30 / 2020

Transaction ID : A5385D3B4DCF14DBF9EE

Amount of Each Receipt this Period  
 50.00

Memo Item

**C. MOON, ALAN, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 42868 IRON BIT PL

City CHANTILLY State VA Zip Code 20152

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 07 / 02 / 2020

Transaction ID : A114D4099CCFA4EDC922

Amount of Each Receipt this Period  
 250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. MOORE, FRANK, H, MR., II**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3701 MAYFIELD RD  
 APT 214  
 City CLEVELAND State OH Zip Code 44121-1750  
 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 07 / 08 / 2020  
**Transaction ID : A3EC217688F6245C2911**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**B. MURFEY, MARY, V, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4515 FAIRFIELD DR  
 City CORONA DL MAR State CA Zip Code 92625  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) WEALTH MANAGE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 09 / 2020  
**Transaction ID : A4FE44B485A35403D802**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. NEW, ALVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 502 S KOENIGHEIM ST  
 STE 1A  
 City SAN ANGELO State TX Zip Code 76903-6769  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) RANCHER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 29 / 2020  
**Transaction ID : A716699D498014536924**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 146
	<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)  
**NEW JOURNEY PAC, INC.**

**A. NICHOLAS, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22651 CLARENDON STREET  
 City WOODLAND HILLS State CA Zip Code 91367-4311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ST BERNARDINE OF SIENA Occupation (for Individual) YOUTH MINISTER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 06 / 2020  
**Transaction ID : AF66361A972F542A9899**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. NICKLAS, LINDA, CHEVES, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 283 MAPLE ST  
 City SUSANVILLE State CA Zip Code 96130-3908  
 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 07 / 15 / 2020  
**Transaction ID : AEA79532E42D14605B93**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. NORSWORTHY, GEORGE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6600 N LOWER CASCADE DR  
 City JACKSON State WY Zip Code 83001-9026  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 31 / 2020  
**Transaction ID : ABD0F9B54FCE64C96B9D**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 146
	<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)  
**NEW JOURNEY PAC, INC.**

**A. O'GALLAGHER, DENNIS, O, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12302 COVINGTON MANOR FARMS RD  
 City FORT WAYNE State IN Zip Code 46814  
 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 07 / 06 / 2020  
**Transaction ID : A68206940EF434DA68E5**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. O'MEARA, VICKI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 275 NORMANDY DRIVE  
 City TAVERNIER State FL Zip Code 33070-2736  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ADSWERVE Occupation (for Individual) ADVISOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 20 / 2020  
**Transaction ID : A271DD05348B84F15BE5**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. ORT, MARY CATHERINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 157 WATERTON  
 City WILLIAMSBURG State VA Zip Code 23188-8400  
 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 ▼ 400.00

Date of Receipt 07 / 20 / 2020  
**Transaction ID : AD19AA49689614F22842**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 146
	<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)  
**NEW JOURNEY PAC, INC.**

**A. ORWIG, THEODORE, L, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 FLATCREEK PLACE

City SPRING	State TX	Zip Code 77381-6103
----------------	-------------	------------------------

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 ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		07		2020

**Transaction ID : A031F1E89E60C434288F**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. ORWIG, THEODORE, L, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 FLATCREEK PLACE

City SPRING	State TX	Zip Code 77381-6103
----------------	-------------	------------------------

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 ▼  
375.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		24		2020

**Transaction ID : A09E952056D4C4194BE9**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. PAGLIARO, JUDY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 240 CAPE SAINT JOHN ROAD

City ANNAPOLIS	State MD	Zip Code 21401-7230
-------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ACCOUNTANT
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2020

**Transaction ID : A4E12FCD2D1D9469EA55**

Amount of Each Receipt this Period  
35.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	160.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. PARKINSON, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 43765 LITTLE CLIFFS ROAD  
 City HOLLYWOOD State MD Zip Code 20636-2444  
 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 07 / 20 / 2020  
**Transaction ID : A442DB815FB614349B11**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**B. PARKINSON, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 43765 LITTLE CLIFFS ROAD  
 City HOLLYWOOD State MD Zip Code 20636-2444  
 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 07 / 28 / 2020  
**Transaction ID : A1C9255B3276646DEA5A**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. PARTINGTON, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 308 AUTUMN RIDGE DR  
 City BOSSIER CITY State LA Zip Code 71111-8151  
 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 07 / 31 / 2020  
**Transaction ID : A014FAF555CE14FF59BF**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	185.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. PATTON, RICHARD, D, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2273 STONEWOOD CT  
 City SAN PEDRO State CA Zip Code 90732-1343  
 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 ▼ 650.00

Date of Receipt 07 / 03 / 2020  
**Transaction ID : AF96663A026D2445A940**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**B. PAWLICK, MARIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 CRABTREE LN  
 City LAKE BLUFF State IL Zip Code 60044  
 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 07 / 21 / 2020  
**Transaction ID : ABAEE08B61DFB4FCD9B1**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. PERRY, RICHARD, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 48W561 IMMELMAN LN  
 City HAMPSHIRE State IL Zip Code 60140-8334  
 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 ▼ 278.00

Date of Receipt 07 / 03 / 2020  
**Transaction ID : A0CB6A18D5A8F47B7B11**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

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



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 65 OF 146
<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)  
**NEW JOURNEY PAC, INC.**

**A. PETTY, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6717 NW 48TH LN  
 City Gainesville State FL Zip Code 32653  
 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 ▼ 1000.00

Date of Receipt 07 / 16 / 2020  
**Transaction ID : AFE2E810633014CA6898**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. PFEIFFER, PATRICIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 31041 WILDWOODS  
 City Evergreen State CO Zip Code 80439-7974  
 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 07 / 20 / 2020  
**Transaction ID : A4A480E08485A49B397A**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. PHILLIPS, GLEN, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 610 GRONLUND PL  
 City Sidney State OH Zip Code 45365-9372  
 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 ▼ 400.00

Date of Receipt 07 / 15 / 2020  
**Transaction ID : A7C63790B7BD547609B5**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 66 OF 146
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**NEW JOURNEY PAC, INC.**

**A. PITTS, WILLIAM, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 116 ORCHARD LN  
 City CENTERVILLE State GA Zip Code 31028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2020  
**Transaction ID : A3F1949D155494954B7C**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. POSSIN, MARC, S, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6093 N 2200TH AVE  
 City GENESEO State IL Zip Code 61254-8834  
 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 ▼ 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 08 / 2020  
**Transaction ID : AFDBEA6CC4E8542139F0**  
 Amount of Each Receipt this Period  
 400.00  
 Memo Item

**C. PROST, VAUGHN, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3305 CRAWFORD ST  
 City COLUMBIA State MO Zip Code 65203  
 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 ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 24 / 2020  
**Transaction ID : A868429156C45422EADE**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1650.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. PURSWELL, WANDA, J, MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1920 HONEY LAUREL DR

City CONROE	State TX	Zip Code 77304-2156
----------------	-------------	------------------------

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 ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	27	/	2020

**Transaction ID : AE2BABF5E218D43B59D7**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. RAINS, G, DON, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1348

City SAN MARCOS	State TX	Zip Code 78667
--------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	16	/	2020

**Transaction ID : AF8271B8ABCBB43A082F**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. RAMSAY, COURTNEY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 FLOSSMORE DR

City LAFAYETTE	State LA	Zip Code 70508-4043
-------------------	-------------	------------------------

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

Name of Employer (for Individual) ARIES MARINE CORP.	Occupation (for Individual) OWNER
---	--------------------------------------

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
07	/	22	/	2020

**Transaction ID : A1350BF85918749E2877**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 146
	<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)  
**NEW JOURNEY PAC, INC.**

**A. RANDISI, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 806 CHESTNUT GLEN GARTH  
 City BALTIMORE State MD Zip Code 21204-3710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RANDISI & ASSOCIATES, INC. Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 07 / 31 / 2020  
**Transaction ID : A2B968607447447EA8B2**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. RANDOL, RANDY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2628 QUENBY AVE  
 City WEST UNIVERSITY PLACE State TX Zip Code 77005-2428  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 06 / 2020  
**Transaction ID : A2563F9E6FAF84C6AB31**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. RANDOL, RANDY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2628 QUENBY AVE  
 City WEST UNIVERSITY PLACE State TX Zip Code 77005-2428  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 20 / 2020  
**Transaction ID : A5CF1041C34254D49ABE**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 69 OF 146
<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)  
**NEW JOURNEY PAC, INC.**

**A. REID, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 445 MADISON STREET  
 City DENVER State CO Zip Code 80206-4438  
 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 ▼ 350.00

Date of Receipt 07 / 20 / 2020  
**Transaction ID : AF52E0679DB424D4EB7E**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. RICE, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2116 AMARGO WAY  
 City NAPLES State FL Zip Code 34119-3369  
 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 07 / 25 / 2020  
**Transaction ID : A2AB5FE2F067B4AFBB29**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. ROBERTSON, TRAVIS, E, SFC,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2465 ANTIOCH RD  
 City WETUMPKA State AL Zip Code 36092-6236  
 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 ▼ 450.00

Date of Receipt 07 / 03 / 2020  
**Transaction ID : A8CB270907BBF4D619FD**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 70 OF 146
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. ROBINSON, LEONARD, D, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3775 N FREEWAY BLVD  
 City SACRAMENTO State CA Zip Code 95834  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) R CITY Occupation (for Individual) CORP MGR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 24 / 2020  
**Transaction ID : AE75FA8C238474BD7BA6**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. RODRIGUEZ, ALBERTO, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5977 SW 51ST ST  
 City MIAMI State FL Zip Code 33155-6321  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AARPA Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 07 / 14 / 2020  
**Transaction ID : A427A638A463245C8B63**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**C. ROMNES, JOHN, WALLACE, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16241 510TH ST  
 City WATERVILLE State MN Zip Code 56096  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 17 / 2020  
**Transaction ID : A2E6985C4A5BC4A0BAEC**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1050.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. RUSHTON, VARINA, D, MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 94 COUNTRY CLUB BLVD

City MOUNTAIN BRK	State AL	Zip Code 35213
----------------------	-------------	-------------------

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 ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	24	/	2020

**Transaction ID : AB76DA54FD68743AAADE**

Amount of Each Receipt this Period  
350.00

Memo Item

**B. RUSSELL, GEORGANN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 115 PARKSIDE PL

City NEVADA CITY	State CA	Zip Code 95959-2800
---------------------	-------------	------------------------

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

Name of Employer (for Individual) G. RUSSELL ENTERPRISES, LTD	Occupation (for Individual) REAL ESTATE BUSINESS CONSULT,
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2020

**Transaction ID : A5A6BB477A8904BF69D6**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. RUSSO, ANTHONY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 395 WEST PASSAIC STREET  
395 WEST PASSAIC STREET

City ROCHELLE PARK	State NJ	Zip Code 07662
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) EXECUTIVE 372724468104000
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	29	/	2020

**Transaction ID : A2679288D784D4F0EBD6**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. RYAN, LARRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18 CINDER CT  
 City SACRAMENTO State CA Zip Code 95831-2738  
 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 ▼ 262.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2020  
**Transaction ID : ADED2D31A43944762A58**  
 Amount of Each Receipt this Period  
 62.50  
 Memo Item

**B. SAHAKIAN, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 200 HAYMAKER CIR  
 City STATE COLLEGE State PA Zip Code 16801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HFL CORP Occupation (for Individual) PRESIDENT  
 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  
 07 / 03 / 2020  
**Transaction ID : A31F0BC4489C24BBEB68**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. SARTORI, DAVID, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15529 WILLOWBROOK AVE  
 City LAKE PLACID State FL Zip Code 33852  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) FARMER  
 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  
 07 / 29 / 2020  
**Transaction ID : AB82927B6227D4F1A9ED**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	612.50
<b>TOTAL</b> This Period (last page this line number only).....	



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

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

FOR LINE NUMBER: PAGE 73 OF 146  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. SARVER, BRAD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2910 BLACKHAWK TRL  
 City ELDRIDGE State IA Zip Code 52748-9327  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 ROCK VALLEY OIL AND CHEMICAL DIRECTOR OF SALES  
 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  
 07 / 14 / 2020  
**Transaction ID : ABDD5C20F5D3945FF911**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. SAUPE, AUDREY, B, MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4256 CORBRIDGE CRSE  
 City WILLIAMSBURG State VA Zip Code 23188  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 HOMEMAKER HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 02 / 2020  
**Transaction ID : AB12D378F13114E0C9C5**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. SCHMIDT, STEVEN, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14718 SE 172ND PLACE  
 City RENTON State WA Zip Code 98058-8701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 RETIRED RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 28 / 2020  
**Transaction ID : A5660CDA22B9748A59A5**  
 Amount of Each Receipt this Period  
 50.00  
 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 74 OF 146
	<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)  
**NEW JOURNEY PAC, INC.**

**A. SCHNEPF, RUSSELL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 866 E LOUISE DR  
 City PALM SPRINGS State CA Zip Code 92262-3208  
 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 07 / 07 / 2020  
**Transaction ID : A39248E7D4E1D4DBE9CE**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. SEIZYK, JANET, M, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3591 W OLD OAKS DR  
 City MILWAUKEE State WI Zip Code 53221-3011  
 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 ▼ 278.00

Date of Receipt 07 / 03 / 2020  
**Transaction ID : AA7A63DE5FCA143C3B9C**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**C. SEWARD, WALTER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1919 WILLOWGREEN DRIVE  
 City BEAVERCREEK State OH Zip Code 45432-4014  
 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 ▼ 700.00

Date of Receipt 07 / 31 / 2020  
**Transaction ID : A059207C4265B4F96B3E**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. SHAW, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 142 W 720TH AVE  
 City FORT SCOTT State KS Zip Code 66701-8782  
 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 ▼ 1728.00

Date of Receipt 07 / 14 / 2020  
**Transaction ID : A4A39F70C42514A23A99**  
 Amount of Each Receipt this Period 400.00  
 Memo Item

**B. SHAW, STUART, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6009 ELEOS CIRCLE  
 City AUSTIN State TX Zip Code 78735-6110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BONNER CARRINGTON Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 18 / 2020  
**Transaction ID : A6C68521AC8844FEE8DA**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. SHETLAR, KEITH, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6708 PASILLA RD NE  
 City RIO RANCHO State NM Zip Code 87144  
 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 07 / 07 / 2020  
**Transaction ID : AE547CCDC113E4413A40**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. SILVERSTEIN, JANET, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1500 PALISADE AVE  
 APT 11C  
 City FORT LEE State NJ Zip Code 07024-5318  
 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 ▼ 850.00

Date of Receipt 07 / 06 / 2020  
**Transaction ID : A7BCD7FE5C22843808F6**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. SMEAD, LARRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 37  
 City ESSEX State NY Zip Code 12936-0037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SASCO Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 20 / 2020  
**Transaction ID : A8FFFE2DF6C44912834**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. SMITH, GEORGE, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 APOLLO RD  
 City MANALAPAN State NJ Zip Code 07726-2601  
 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 ▼ 750.00

Date of Receipt 07 / 03 / 2020  
**Transaction ID : A014443326C0D4713BD0**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 77 OF 146
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**NEW JOURNEY PAC, INC.**

**A. SMITH, JACK, D, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 177 BOUNDARY LN  
 City OTTERVILLE State MO Zip Code 65348-2420  
 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 ▼ 600.00

Date of Receipt 07 / 07 / 2020  
**Transaction ID : AD21C0620555041798CE**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. SMITH, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 154  
 City BUTTE CITY State CA Zip Code 95920-0154  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MR. Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 28 / 2020  
**Transaction ID : A49465E5E0866448F8DA**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. SNELGROVE, EDWARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 240 LOYOLA DR  
 City MILLBRAE State CA Zip Code 94030-2930  
 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 07 / 02 / 2020  
**Transaction ID : AB04EAF8981874842B49**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 78 OF 146
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**NEW JOURNEY PAC, INC.**

**A. SPARKS, TERRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4629 NW 34TH ST.  
 City OKLAHOMA CITY State OK Zip Code 73122-1329  
 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 ▼ 350.00

Date of Receipt 07 / 13 / 2020  
**Transaction ID : A8E86BF88184048F2A28**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. SPENCE, TANCY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2728 COUNTRY LN  
 City BILLINGS State MT Zip Code 59106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 21 / 2020  
**Transaction ID : A54BAE5020D4F4C0B806**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. SPIEGEL, MARC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26 BALBOA COVES  
 City NEWPORT BEACH State CA Zip Code 92663-3226  
 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 ▼ 360.00

Date of Receipt 07 / 06 / 2020  
**Transaction ID : ACB43425E4E864FA3A08**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	325.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 146
	<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	

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)  
**NEW JOURNEY PAC, INC.**

**A. SPRINGER, BARBARA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2215 CEDAR SPRINGS RD  
 APT 1611  
 City DALLAS State TX Zip Code 75201-1863  
 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 ▼ 1000.00

Date of Receipt 07 / 21 / 2020  
**Transaction ID : AC1ECF501B9044F92963**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. STAHMANN, KATHRYN, A, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 42 N TANGLEWOOD SPUR  
 City SEDONA State AZ Zip Code 86351-7835  
 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 ▼ 1260.00

Date of Receipt 07 / 10 / 2020  
**Transaction ID : A60E4095233504F4BAE9**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**C. STEC, FRANK, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3836 CHESAPEAKE LN  
 City NAPERVILLE State IL Zip Code 60564-2008  
 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 07 / 10 / 2020  
**Transaction ID : A7F5FAF0DE6AF4BA5879**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 80 OF 146
<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)  
**NEW JOURNEY PAC, INC.**

**A. STEWART, FRANK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 32 ROWLEY SHR  
 City GLOUCESTER State MA Zip Code 01930-1144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 08 / 2020  
**Transaction ID : A7F60B14D041440DFA01**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. STIDUM, THEA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 915 11TH ST  
 City SACRAMENTO State CA Zip Code 95814-2804  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 03 / 2020  
**Transaction ID : AAD728F1B6A984FF2B51**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. STRATTON, ALAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 24029 S 80TH AVE  
 City FRANKFORT State IL Zip Code 60423  
 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 07 / 13 / 2020  
**Transaction ID : A9567EF4BACE54ADFB87**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 146
	<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)  
**NEW JOURNEY PAC, INC.**

**A. SUTER, GEORGE, B, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2580 GREENWOOD ACRES DR  
 City DEKALB State IL Zip Code 60115  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 16 / 2020  
**Transaction ID : AA54F5241733E4703969**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. SUTHERLAND, RICHARD, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1637 MONTGOMERY ST  
 City OROVILLE State CA Zip Code 95965  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 20 / 2020  
**Transaction ID : A4D44A139E5E74857B8D**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. SYNNESTVEDT, ANNE, T, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 550  
 City BRYN ATHYN State PA Zip Code 19009  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 13 / 2020  
**Transaction ID : A1049DE410BD2409B980**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

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

Mailing Address 2401 BOARDWALK DR

City MESQUITE	State TX	Zip Code 75181
------------------	-------------	-------------------

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

Name of Employer (for Individual) CRAWFORD ELECTRIC SUPPLY	Occupation (for Individual) ELECTRICAL SALE
---	--

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
07	/	10	/	2020

**Transaction ID : AE30B97A90E8C43EC84F**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 949 RIVER ST

City GASSAWAY	State WV	Zip Code 26624-1183
------------------	-------------	------------------------

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 ▼  
256.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	27	/	2020

**Transaction ID : ACCD6552954B14FC8884**

Amount of Each Receipt this Period  
78.00

Memo Item

**C. TEICHAART, JOAN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 118 N HIGH ST

City ZELIENOPE	State PA	Zip Code 16063
-------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	13	/	2020

**Transaction ID : AE92E7D19E759424D9AE**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	578.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. THOMPSON, JOEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8605 GRESHAM DR  
 City WAXHAW State NC Zip Code 28173-8075  
 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 ▼ 525.00

Date of Receipt 07 / 06 / 2020  
**Transaction ID : AB8ACFBB955304EE3906**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. THOMPSON, LUCILLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 660 WHITMORE RD APT 102  
 City DETROIT State MI Zip Code 48203-1841  
 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 07 / 18 / 2020  
**Transaction ID : A1AFA0E19BD7F416CA9E**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**C. THOMPSON, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 SUNNY PINES CIR  
 City DAYTONA BEACH State FL Zip Code 32118-5219  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) THOMPSON PUMP CO. Occupation (for Individual) CHAIRMAN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 14 / 2020  
**Transaction ID : AD95B291B5A834A1BAC0**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. THUNDER-HAAB, KETURAH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 436 PINE BRAE ST  
 City ANN ARBOR State MI Zip Code 48105-2723  
 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 ▼ 225.00

Date of Receipt 07 / 03 / 2020  
**Transaction ID : A14421829E0974502973**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**B. TILDEN, ELIZABETH, A, MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2900 CIRCLE CREST CT  
 City PROSPECT State KY Zip Code 40059-7114  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 13 / 2020  
**Transaction ID : AEC3A153730974414B17**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. TIMMS, CARL, R, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16350 LYONS VALLEY RD  
 City JAMUL State CA Zip Code 91935-3717  
 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 ▼ 240.00

Date of Receipt 07 / 03 / 2020  
**Transaction ID : AF4EDDF77D7CE49DA9E4**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. TINGLE, RALPH, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 87 CALLE VENTOSO W  
 City SANTA FE State NM Zip Code 87506  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 07 / 2020  
**Transaction ID : AE5DB10030D014558BA6**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. TRAVIS, TIMOTHY, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 16405  
 City DENVER State CO Zip Code 80216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FAA Occupation (for Individual) AIR TRAFFIC CONTROLLER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 17 / 2020  
**Transaction ID : A0DF1090ED5C347ADB81**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. TRIDER, GARY, V, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7950 MESA TRAILS CIRCLE  
 City AUSTIN State TX Zip Code 78731-1445  
 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 ▼ 203.00

Date of Receipt 07 / 20 / 2020  
**Transaction ID : A4283CB144E694962A21**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. UNGER, MARGARET, Z, MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 44394 CLUBHOUSE DR  
 City EL MACERO State CA Zip Code 95618-1019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 20 / 2020  
**Transaction ID : A692B5BAD05C44DA1B5C**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. VANOUS, VICTOR, G, MR., SR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 130 S MEADOW DR  
 City GLEN BURNIE State MD Zip Code 21060-7227  
 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 07 / 03 / 2020  
**Transaction ID : A2195A27606E74AEAAE7**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**C. WARACH, JANE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 917 THUNDERBIRD DR  
 City EL PASO State TX Zip Code 79912-3409  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) CPA  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 31 / 2020  
**Transaction ID : A54685439409F47B1AC8**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. WARKENTIN, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6521 CORDOBA RD  
 STE 2  
 City GOLETA State CA Zip Code 93117-4867  
 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 07 / 06 / 2020  
**Transaction ID : AA07EDB7C189E46C6945**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. WARKENTIN, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6521 CORDOBA RD  
 STE 2  
 City GOLETA State CA Zip Code 93117-4867  
 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 ▼ 400.00

Date of Receipt 07 / 31 / 2020  
**Transaction ID : A7CF08E9B82414A4B95B**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. WARREN, GERALD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3302 BLUFF AVENUE SOUTHEAST  
 City SALEM State OR Zip Code 97302-3372  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 06 / 2020  
**Transaction ID : A6E4C783C42D74C5A863**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. WATKINS, CHARLES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18000 SARAH HILL LN  
 City LAKE OSWEGO State OR Zip Code 97035-6549  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WAVE FORM SYSTEMS, INC. Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 08 / 2020  
**Transaction ID : AC1D26B6E8B634ABBA78**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. WEBB, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2113 COLUMBINE TER  
 City SALINA State KS Zip Code 67401-9111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WEBB & ASSOCIATES, INC. Occupation (for Individual) SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 24 / 2020  
**Transaction ID : A812EBECE70DF4C7C9CF**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. WELLS, LEIGHTON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 717 EDGEMONT WAY  
 City SPRINGFIELD State OR Zip Code 97477-3607  
 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 ▼ 350.00

Date of Receipt 07 / 06 / 2020  
**Transaction ID : A4283D3489C894319A69**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	525.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**NEW JOURNEY PAC, INC.**

**A. WELLS, LEIGHTON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 717 EDGEMONT WAY  
 City SPRINGFIELD State OR Zip Code 97477-3607  
 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 ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 28 / 2020  
**Transaction ID : A354207FB247B4C959F2**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. WELSH, JOHN, L, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2978 BEULAH RD  
 City KEEZLETOWN State VA Zip Code 22832-2302  
 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 ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 20 / 2020  
**Transaction ID : A196549AC41EC4A31897**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

**C. WHALLON, LOU, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19 OCEANAIRE DRIVE  
 19 OCEANAIRE DR  
 City RANCHO PALOS VERDES State CA Zip Code 90275  
 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  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 07 / 2020  
**Transaction ID : A91F6266C4F3C4C3E839**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	185.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. WHITE III, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 24287  
 City CHATTANOOGA State TN Zip Code 37422-4287  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ATHENS DISTRIBUTING CO Occupation (for Individual) WHOLESALE WINE & SPIRITS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 09 / 2020  
**Transaction ID : A283194A066984E3FA64**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. WILLIAMS, DELWIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 121123  
 City ARLINGTON State TX Zip Code 76012-1123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ACCLAIM PHYSICIANS GROUP Occupation (for Individual) PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 15 / 2020  
**Transaction ID : A530F2462E38341BCA0C**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. WINTER, KAREN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 38  
 City GOLD RUN State CA Zip Code 95717-0038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GOLD RUN PARTNERS, INC. Occupation (for Individual) FINANCIAL MANAGEMENT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 09 / 2020  
**Transaction ID : A202433F673AC40EC8A0**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. WITHERSPOON, MARJ, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6434 ORCHID LANE  
 City DALLAS State TX Zip Code 75230-4121  
 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 ▼ 1800.00

Date of Receipt 07 / 11 / 2020  
**Transaction ID : AE1685139899B49F8853**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**B. WOLF, FRAN, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3690 DURST CLAGG RD  
 City CORTLAND State OH Zip Code 44410-9546  
 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 07 / 20 / 2020  
**Transaction ID : AED9C826258F24FAB9A8**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. WOLF, FRAN, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3690 DURST CLAGG RD  
 City CORTLAND State OH Zip Code 44410-9546  
 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 ▼ 350.00

Date of Receipt 07 / 28 / 2020  
**Transaction ID : A33800E93FA3B4A67928**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. WRIGHT, ANNE, L, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 149 COUNTY ROAD 255  
 City ATHENS State TN Zip Code 37303-6570  
 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 07 / 17 / 2020  
**Transaction ID : A0600976B7628439CA70**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. WYNNE, DIANA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 112 CENTER COVE III LOOP  
 City SPICEWOOD State TX Zip Code 78669-3108  
 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 07 / 04 / 2020  
**Transaction ID : A80E9FDCEC4134F2AB5A**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. YODER, MAHLON, DAVID, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 33102 JAN CIR  
 City MENIFEE State CA Zip Code 92584  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 07 / 2020  
**Transaction ID : AE93B3F668FA74A2DAB4**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 93 OF 146  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**ZUERNER, JOHN, , ,**

Mailing Address **8592 OLD OLYMPIC HWY**

City **SEQUIM**    State **WA**    Zip Code **98382-6812**

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 ▼  
**600.00**

Date of Receipt  
**07 / 20 / 2020**

**Transaction ID : AAF80FB1BAFF14E49B25**

Amount of Each Receipt this Period  
**100.00**

Memo Item

**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

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>75011.50</b>

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. 9SEVEN CONSULTING</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2020	
Mailing Address 499 SOUTH CAPITOL STREET SW #405		FEC Identification Number C [REDACTED] <b>Transaction ID : B43D54E00C</b> Amount of Each Disbursement this Period 1693.00	
City WASHINGTON	State DC	Zip Code 20003	Category/ Type 001
Purpose of Disbursement COMPLIANCE CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. 9SEVEN CONSULTING</b>		Date of Disbursement MM / DD / YYYY 07 / 04 / 2020	
Mailing Address 499 SOUTH CAPITOL STREET SW #405		FEC Identification Number C [REDACTED] <b>Transaction ID : B24EFE7A28I</b> Amount of Each Disbursement this Period 1211.25	
City WASHINGTON	State DC	Zip Code 20003	Category/ Type 001
Purpose of Disbursement COMPLIANCE CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. ADOBE</b>		Date of Disbursement MM / DD / YYYY 07 / 06 / 2020	
Mailing Address 345 PARK AVENUE		FEC Identification Number C [REDACTED] <b>Transaction ID : BC843D95BC</b> Amount of Each Disbursement this Period 29.99	
City SAN JOSE	State CA	Zip Code 95110-2704	Category/ Type 001
Purpose of Disbursement OFFICE SUBSCRIPTION		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)..... ▶

2934.24

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. ADOBE</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address 345 PARK AVENUE		FEC Identification Number C [REDACTED] <b>Transaction ID : B1F9C5CE9B</b>
City SAN JOSE	State CA	Zip Code 95110-2704
Purpose of Disbursement OFFICE SUBSCRIPTION		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 52.99
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ADOBE</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2020
Mailing Address 345 PARK AVENUE		FEC Identification Number C [REDACTED] <b>Transaction ID : B5DC71253B</b>
City SAN JOSE	State CA	Zip Code 95110-2704
Purpose of Disbursement OFFICE SUBSCRIPTION		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 57.36
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. ADOBE</b>		Date of Disbursement MM / DD / YYYY 07 / 28 / 2020
Mailing Address 345 PARK AVENUE		FEC Identification Number C [REDACTED] <b>Transaction ID : B43E3F9506</b>
City SAN JOSE	State CA	Zip Code 95110-2704
Purpose of Disbursement OFFICE SUBSCRIPTION		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 19.99
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)..... ▶

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

130.34
[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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. ALLIANZ</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020
Mailing Address 9950 MAYLAND DRIVE		FEC Identification Number C [REDACTED] <b>Transaction ID : B86A8C0657I</b> Amount of Each Disbursement this Period [REDACTED] 23.63
City RICHMOND	State VA	Zip Code 23233
Purpose of Disbursement TRAVEL	Category/Type 001	
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>B. AMAZON</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2020
Mailing Address 410 TERRY AVE N		FEC Identification Number C [REDACTED] <b>Transaction ID : B2080AAD86I</b> Amount of Each Disbursement this Period [REDACTED] 229.25
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement OFFICE SUPPLIES	Category/Type 001	
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>C. AMAZON</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2020
Mailing Address 410 TERRY AVE N		FEC Identification Number C [REDACTED] <b>Transaction ID : B186516432I</b> Amount of Each Disbursement this Period [REDACTED] 208.69
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement OFFICE SUPPLIES	Category/Type 001	
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)..... ▶

461.57

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. AMAZON**

Mailing Address 410 TERRY AVE N

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES

Category/  
Type

Candidate Name

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

Date of Disbursement  

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

FEC Identification Number  
  
**Transaction ID : B5554614664**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD.

City FORT WORTH State TX Zip Code 76155-2605

Purpose of Disbursement AIRFARE

Category/  
Type

Candidate Name

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

Date of Disbursement  

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	5			2	0	2	0		

FEC Identification Number  
  
**Transaction ID : B3E6D6845F1**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD.

City FORT WORTH State TX Zip Code 76155-2605

Purpose of Disbursement AIRFARE

Category/  
Type

Candidate Name

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

Date of Disbursement  

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	5			2	0	2	0		

FEC Identification Number  
  
**Transaction ID : B9F7B3F2C7**  
 Amount of Each Disbursement this Period

Memo Item

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

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address 1920 MCKINNEY AVE 7TH FLOOR

City DALLAS State TX Zip Code 75201

Purpose of Disbursement  
CREDIT CARD FEES

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2020

FEC Identification Number

C  
Transaction ID : B12077D74F7  
Amount of Each Disbursement this Period  
61095.31

Memo Item

Full Name (Last, First, Middle Initial)

**B. APPLE**

Mailing Address ONE APPLE PARK WAY

City CUPERTINO State CA Zip Code 95014-0642

Purpose of Disbursement  
OFFICE EQUIPMENT

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2020

FEC Identification Number

C  
Transaction ID : B1BA7EFDD7  
Amount of Each Disbursement this Period  
8.56

Memo Item

Full Name (Last, First, Middle Initial)

**C. APPLE**

Mailing Address ONE APPLE PARK WAY

City CUPERTINO State CA Zip Code 95014-0642

Purpose of Disbursement  
OFFICE EQUIPMENT

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2020

FEC Identification Number

C  
Transaction ID : B3512D71A3  
Amount of Each Disbursement this Period  
138.03

Memo Item

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

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

61241.90

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. APPLE**

Mailing Address ONE APPLE PARK WAY

City CUPERTINO State CA Zip Code 95014-0642

Purpose of Disbursement OFFICE EQUIPMENT

001  
Category/  
Type

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 16 / 2020

FEC Identification Number

C  
Transaction ID : **BB2FCCD5E**  
Amount of Each Disbursement this Period  
1047.53

Memo Item

Full Name (Last, First, Middle Initial)

**B. BRAND SPIN**

Mailing Address BOX 10938 UNIVERSITY BLVD

City BLACKSBURG State VA Zip Code 24060

Purpose of Disbursement CREATIVE

001  
Category/  
Type

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 23 / 2020

FEC Identification Number

C  
Transaction ID : **B26BB5C94D**  
Amount of Each Disbursement this Period  
520.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. CAMPAIGN FUNDING DIRECT, INC.**

Mailing Address 1420 SPRING HILL ROAD

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement DIRECT MAIL

001  
Category/  
Type

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 06 / 2020

FEC Identification Number

C  
Transaction ID : **B92FE1195C**  
Amount of Each Disbursement this Period  
5237.98

Memo Item

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

6805.51

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. CAMPAIGN FUNDING DIRECT, INC.</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2020
Mailing Address 1420 SPRING HILL ROAD		FEC Identification Number C [REDACTED] <b>Transaction ID : BE2EC1C01E</b> Amount of Each Disbursement this Period [REDACTED] 8403.67
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement DIRECT MAIL		Category/Type 001
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>B. CAMPAIGN FUNDING DIRECT, INC.</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2020
Mailing Address 1420 SPRING HILL ROAD		FEC Identification Number C [REDACTED] <b>Transaction ID : B42ECAC309</b> Amount of Each Disbursement this Period [REDACTED] 1623.16
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement DIRECT MAIL		Category/Type 001
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>C. COOK COMPANY</b>		Date of Disbursement MM / DD / YYYY 07 / 15 / 2020
Mailing Address 499 SOUTH CAPITOL STREET SW SUITE 405		FEC Identification Number C [REDACTED] <b>Transaction ID : B0119156451</b> Amount of Each Disbursement this Period [REDACTED] 35.00
City WASHINGTON	State DC	Zip Code 20003-4018
Purpose of Disbursement OFFICE SUBSCRIPTIONS		Category/Type 001
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 10061.83
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. DAMIVADA THE PROMOTIONAL PRODUCTS COMPANY**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 327 FOREST BEND DRIVE

M M M	/	D D D	/	Y Y Y Y Y
07		01		2020

City  
MOUNT JULIET

State  
TN

Zip Code  
37122

FEC Identification Number

Purpose of Disbursement  
PAC STRATEGY CONSULTING

001
Category/ Type

C
---

**Transaction ID : B06D4ACB9E**  
Amount of Each Disbursement this Period

Candidate Name

2000.00
---------

Office Sought:  House  
 Senate  
 President

State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:

Primary  General  
 Other (specify) ▼

Memo Item

**B. DELTA**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1030 DELTA BLVD

M M M	/	D D D	/	Y Y Y Y Y
07		16		2020

City  
ATLANTA

State  
GA

Zip Code  
30354

FEC Identification Number

Purpose of Disbursement  
TRAVEL

001
Category/ Type

C
---

**Transaction ID : B47D176A02f**  
Amount of Each Disbursement this Period

Candidate Name

596.60
--------

Office Sought:  House  
 Senate  
 President

State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:

Primary  General  
 Other (specify) ▼

Memo Item

**C. DELTA**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1030 DELTA BLVD

M M M	/	D D D	/	Y Y Y Y Y
07		23		2020

City  
ATLANTA

State  
GA

Zip Code  
30354

FEC Identification Number

Purpose of Disbursement  
TRAVEL

001
Category/ Type

C
---

**Transaction ID : BB4B42C70E**  
Amount of Each Disbursement this Period

Candidate Name

346.60
--------

Office Sought:  House  
 Senate  
 President

State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:

Primary  General  
 Other (specify) ▼

Memo Item

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

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

2943.20
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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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. DIRECTMAIL.COM</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2020
Mailing Address ' 5540 KETCH ROAD '		FEC Identification Number C [REDACTED] <b>Transaction ID : BD3DB913B2</b> Amount of Each Disbursement this Period [REDACTED] 29500.00
City PRINCE FREDERICK	State MD	Zip Code 20678-3406
Purpose of Disbursement POSTAGE		Category/ Type 001
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>B. DJ CAR SERVICES</b>		Date of Disbursement MM / DD / YYYY 07 / 03 / 2020
Mailing Address 220 NW 90TH ST		FEC Identification Number C [REDACTED] <b>Transaction ID : B25B284BBF</b> Amount of Each Disbursement this Period [REDACTED] 835.00
City OKLAHOMA CITY	State OK	Zip Code 73114-3611
Purpose of Disbursement TRAVEL		Category/ Type 001
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>C. DJ CAR SERVICES</b>		Date of Disbursement MM / DD / YYYY 07 / 29 / 2020
Mailing Address 220 NW 90TH ST		FEC Identification Number C [REDACTED] <b>Transaction ID : BB16B43AC</b> Amount of Each Disbursement this Period [REDACTED] 400.00
City OKLAHOMA CITY	State OK	Zip Code 73114-3611
Purpose of Disbursement TRAVEL		Category/ Type 001
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 30735.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. DROPBOX**

Mailing Address 185 BERRY ST.  
400

City SAN FRANCISCO State CA Zip Code 94107-5705

Purpose of Disbursement  
OFFICE SUBSCRIPTION

Candidate Name

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

001  
Category/  
Type

Date of Disbursement  
MM / DD / YYYY  
07 / 09 / 2020

FEC Identification Number  
C  
**Transaction ID : B3177D461B:**  
Amount of Each Disbursement this Period  
150.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. ECG DATA CENTER**

Mailing Address 1420 SPRING HILL ROAD

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement  
POSTAGE

Candidate Name

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

001  
Category/  
Type

Date of Disbursement  
MM / DD / YYYY  
07 / 27 / 2020

FEC Identification Number  
C  
**Transaction ID : BA38E51676E**  
Amount of Each Disbursement this Period  
3338.62

Memo Item

Full Name (Last, First, Middle Initial)

**C. ESPRESSO MAIL**

Mailing Address 7750 OKEECHOBEE BLVD

City WEST PALM BEACH State FL Zip Code 33411-2104

Purpose of Disbursement  
EMAIL

Candidate Name

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

001  
Category/  
Type

Date of Disbursement  
MM / DD / YYYY  
07 / 06 / 2020

FEC Identification Number  
C  
**Transaction ID : B148A8F0F5**  
Amount of Each Disbursement this Period  
67.74

Memo Item

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

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

3556.36

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. EXPEDIA**

Mailing Address 333 108TH AVENUE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement  
TRAVEL

**001**  
Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**C**   
**Transaction ID : B8D51777AB**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. EXPEDIA**

Mailing Address 333 108TH AVENUE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement  
TRAVEL

**001**  
Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**C**   
**Transaction ID : B759688C544**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. EXPEDIA**

Mailing Address 333 108TH AVENUE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement  
TRAVEL

**001**  
Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**C**   
**Transaction ID : B075963081/**  
Amount of Each Disbursement this Period

Memo Item

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

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. EXPEDIA**

Mailing Address 333 108TH AVENUE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2020

FEC Identification Number

C  
Transaction ID : B5E945C2EA  
Amount of Each Disbursement this Period  
518.90

Memo Item

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120-4117

Purpose of Disbursement SHIPPING

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 22 / 2020

FEC Identification Number

C  
Transaction ID : BB1B505EA6  
Amount of Each Disbursement this Period  
273.01

Memo Item

Full Name (Last, First, Middle Initial)

**C. FEDEX**

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120-4117

Purpose of Disbursement SHIPPING

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 24 / 2020

FEC Identification Number

C  
Transaction ID : B3171504C71  
Amount of Each Disbursement this Period  
280.02

Memo Item

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

1071.93

**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)  
**NEW JOURNEY PAC, INC.**

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

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120-4117

Purpose of Disbursement SHIPPING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 27 / 2020

FEC Identification Number: C

Transaction ID : B341A467A6

Amount of Each Disbursement this Period: 29.96

Memo Item

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

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120-4117

Purpose of Disbursement SHIPPING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 29 / 2020

FEC Identification Number: C

Transaction ID : B89D5D69D9I

Amount of Each Disbursement this Period: 34.07

Memo Item

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

Mailing Address 11325 RANDOM HILLS ROAD SUITE 240

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement BANK FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 31 / 2020

FEC Identification Number: C

Transaction ID : BB8AB7088C

Amount of Each Disbursement this Period: 719.76

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 783.79

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. FLORIDA POWER AND LIGHTS**

Mailing Address 9250 WEST FLAGLER STREET

City MIAMI State FL Zip Code 33174-3415

Purpose of Disbursement  
UTILITES

Category/  
Type

Candidate Name

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B36D81D70A**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043-1351

Purpose of Disbursement  
EMAILS

Category/  
Type

Candidate Name

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B358F28A51A**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043-1351

Purpose of Disbursement  
EMAIL

Category/  
Type

Candidate Name

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B8F294BB08**  
Amount of Each Disbursement this Period

Memo Item

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

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PARKWAY

City  
MOUNTAIN VIEW

State  
CA

Zip Code  
94043-1351

Purpose of Disbursement  
EMAIL

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	9		2	0	2	0		

FEC Identification Number

**Transaction ID : B28C4B9B62**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. GRAMMARLY**

Mailing Address 548 MARKET STREET, #35410

City  
SAN FRANCISCO

State  
CA

Zip Code  
94104-5401

Purpose of Disbursement  
OFFICE SUPPLIES

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				0	7		2	0	2	0		

FEC Identification Number

**Transaction ID : BF51EA5562f**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. GUSTO**

Mailing Address 525 20TH STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94121-3122

Purpose of Disbursement  
PAYROLL TAXES

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				0	3		2	0	2	0		

FEC Identification Number

**Transaction ID : B2839C3CDf**  
Amount of Each Disbursement this Period

Memo Item

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

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

2	4	8	.	0	7
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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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. GUSTO</b>		Date of Disbursement MM / DD / YYYY 07 / 03 / 2020
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : BA719B002C</b> Amount of Each Disbursement this Period 51.00
City SAN FRANCISCO	State CA	Zip Code 94121-3122
Purpose of Disbursement PAYROLL FEE		Category/Type 001
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>B. GUSTO</b>		Date of Disbursement MM / DD / YYYY 07 / 03 / 2020
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : BA0EFA050F</b> Amount of Each Disbursement this Period 430.14
City SAN FRANCISCO	State CA	Zip Code 94121-3122
Purpose of Disbursement PAYROLL WAGES		Category/Type 001
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>C. PHILLIPS, MARAINA, , ,</b>		Date of Disbursement MM / DD / YYYY 07 / 03 / 2020
Mailing Address 2910 NE 8TH AVE		FEC Identification Number C [REDACTED] <b>Transaction ID : BB0C2929A2</b> Amount of Each Disbursement this Period 430.14
City POMPANO BEACH	State FL	Zip Code 33064-5330
Purpose of Disbursement PAYROLL		Category/Type 001
Candidate Name		Memo Item <input checked="" 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	481.14
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. GUSTO</b>		Date of Disbursement MM / DD / YYYY 07 / 03 / 2020	
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED]	
City SAN FRANCISCO	State CA	Zip Code 94121-3122	Transaction ID : <b>B2CB555539</b>
Purpose of Disbursement PAYROLL WAGES		Category/ Type 001	Amount of Each Disbursement this Period 1200.00
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:			

Full Name (Last, First, Middle Initial) <b>B. BALVEVRE, KIMBERLY, , ,</b>		Date of Disbursement MM / DD / YYYY 07 / 03 / 2020	
Mailing Address 5418 ORLEANS AVE		FEC Identification Number C [REDACTED]	
City MOUNT JULIET	State TN	Zip Code 37122-2891	Transaction ID : <b>BA53EB3E87</b>
Purpose of Disbursement PAYROLL WAGES		Category/ Type 001	Amount of Each Disbursement this Period 1200.00
Candidate Name		<input checked="" 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:			

Full Name (Last, First, Middle Initial) <b>C. GUSTO</b>		Date of Disbursement MM / DD / YYYY 07 / 03 / 2020	
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED]	
City SAN FRANCISCO	State CA	Zip Code 94121-3122	Transaction ID : <b>BF075283551</b>
Purpose of Disbursement PAYROLL WAGES		Category/ Type 001	Amount of Each Disbursement this Period 400.00
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:			

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

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

1600.00
[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 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)  
**NEW JOURNEY PAC, INC.**

**A. TRAYWICK, BRADFORD, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 100 I ST SE  
APT 610

City WASHINGTON State DC Zip Code 20003-4861

Purpose of Disbursement PAYROLL WAGES Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 07 / 03 / 2020

FEC Identification Number C  
Transaction ID : B8FAB536BC  
Amount of Each Disbursement this Period 400.00

Memo Item

**B. GUSTO**

Full Name (Last, First, Middle Initial)

Mailing Address 525 20TH STREET

City SAN FRANCISCO State CA Zip Code 94121-3122

Purpose of Disbursement PAYROLL FEE Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 07 / 09 / 2020

FEC Identification Number C  
Transaction ID : B3A4B164A2!  
Amount of Each Disbursement this Period 12.00

Memo Item

**C. GUSTO**

Full Name (Last, First, Middle Initial)

Mailing Address 525 20TH STREET

City SAN FRANCISCO State CA Zip Code 94121-3122

Purpose of Disbursement PAYROLL WAGES Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 07 / 09 / 2020

FEC Identification Number C  
Transaction ID : B71AAC6EA  
Amount of Each Disbursement this Period 1156.40

Memo Item

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

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

1168.40

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. GUSTO</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2020	
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : B3DB7EEC6</b> Amount of Each Disbursement this Period [REDACTED] 216.00	
City SAN FRANCISCO	State CA	Zip Code 94121-3122	Category/ Type 001
Purpose of Disbursement PAYROLL TAXES		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. GUSTO</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2020	
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : B596835335E</b> Amount of Each Disbursement this Period [REDACTED] 346.00	
City SAN FRANCISCO	State CA	Zip Code 94121-3122	Category/ Type 001
Purpose of Disbursement PAYROLL WAGES		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. TRAYWICK, BRADFORD, , ,</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2020	
Mailing Address 100 I ST SE APT 610		FEC Identification Number C [REDACTED] <b>Transaction ID : BDAAEF152I</b> Amount of Each Disbursement this Period [REDACTED] 346.00	
City WASHINGTON	State DC	Zip Code 20003-4861	Category/ Type 001
Purpose of Disbursement PAYROLL WAGES		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 562.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]



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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. GUSTO</b>		Date of Disbursement MM / DD / YYYY 07 / 15 / 2020
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED]
City SAN FRANCISCO	State CA	Zip Code 94121-3122
Purpose of Disbursement PAYROLL WAGES	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period [REDACTED] 346.15	
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:		

Full Name (Last, First, Middle Initial) <b>B. WILLIAMS, DAREN, , ,</b>		Date of Disbursement MM / DD / YYYY 07 / 15 / 2020
Mailing Address 9318 OWINGS CHOICE CT		FEC Identification Number C [REDACTED]
City OWINGS MILLS	State MD	Zip Code 21117-6344
Purpose of Disbursement PAYROLL	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period [REDACTED] 346.15	
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 checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. GUSTO</b>		Date of Disbursement MM / DD / YYYY 07 / 15 / 2020
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED]
City SAN FRANCISCO	State CA	Zip Code 94121-3122
Purpose of Disbursement PAYROLL WAGES	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period [REDACTED] 380.00	
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

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

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

[REDACTED] 726.15
[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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. SWINSON, AMBER, , ,</b>		Date of Disbursement MM / DD / YYYY 07 / 15 / 2020	
Mailing Address 200 CAPSTONE DR UNIT 307		FEC Identification Number C [REDACTED] <b>Transaction ID : BACBEE391E</b> Amount of Each Disbursement this Period [REDACTED] 380.00	
City LYNCHBURG	State VA	Zip Code 24502-5198	Category/ Type 001
Purpose of Disbursement PAYROLL		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. GUSTO</b>		Date of Disbursement MM / DD / YYYY 07 / 15 / 2020	
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : BF925CCEB3</b> Amount of Each Disbursement this Period [REDACTED] 576.80	
City SAN FRANCISCO	State CA	Zip Code 94121-3122	Category/ Type 001
Purpose of Disbursement PAYROLL WAGES		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. SWINSO, ANGELA, , ,</b>		Date of Disbursement MM / DD / YYYY 07 / 15 / 2020	
Mailing Address 499 S CAPITOL ST SW STE 405		FEC Identification Number C [REDACTED] <b>Transaction ID : B05F73DE15</b> Amount of Each Disbursement this Period [REDACTED] 576.80	
City WASHINGTON	State DC	Zip Code 20003-4018	Category/ Type 001
Purpose of Disbursement PAYROLL WAGES		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

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

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

[REDACTED] 576.80
[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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. GUSTO</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2020
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : B9158FC2A8</b> Amount of Each Disbursement this Period [REDACTED] 119.07
City SAN FRANCISCO	State CA	Zip Code 94121-3122
Purpose of Disbursement PAYROLL TAXES		Category/ Type 001
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>B. GUSTO</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2020
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : BFA384BE82</b> Amount of Each Disbursement this Period [REDACTED] 50.00
City SAN FRANCISCO	State CA	Zip Code 94121-3122
Purpose of Disbursement PAYROLL FEE		Category/ Type 001
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>C. GUSTO</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2020
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : B105D0AAB1</b> Amount of Each Disbursement this Period [REDACTED] 430.14
City SAN FRANCISCO	State CA	Zip Code 94121-3122
Purpose of Disbursement PAYROLL WAGES		Category/ Type 001
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)..... ▶

599.21

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. PHILLIPS, MARAINA, , ,</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2020	
Mailing Address 2910 NE 8TH AVE		FEC Identification Number C [REDACTED] <b>Transaction ID : BAB9A5EBC:</b> Amount of Each Disbursement this Period [REDACTED] 430.14	
City POMPANO BEACH	State FL	Zip Code 33064-5330	Category/ Type 001
Purpose of Disbursement PAYROLL		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. GUSTO</b>		Date of Disbursement MM / DD / YYYY 07 / 22 / 2020	
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : B7049790BF5</b> Amount of Each Disbursement this Period [REDACTED] 420.00	
City SAN FRANCISCO	State CA	Zip Code 94121-3122	Category/ Type 001
Purpose of Disbursement PAYROLL WAGES		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. SWINSON, AMBER, , ,</b>		Date of Disbursement MM / DD / YYYY 07 / 22 / 2020	
Mailing Address 200 CAPSTONE DR UNIT 307		FEC Identification Number C [REDACTED] <b>Transaction ID : B0D2B6BB9:</b> Amount of Each Disbursement this Period [REDACTED] 420.00	
City LYNCHBURG	State VA	Zip Code 24502-5198	Category/ Type 001
Purpose of Disbursement PAYROLL		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

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

[REDACTED] 420.00

**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)  
**NEW JOURNEY PAC, INC.**

**A. GUSTO**

Full Name (Last, First, Middle Initial)

Mailing Address 525 20TH STREET

City SAN FRANCISCO State CA Zip Code 94121-3122

Purpose of Disbursement PAYROLL WAGES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 22 / 2020

FEC Identification Number: C

Transaction ID : B75C5D9BC7

Amount of Each Disbursement this Period: 1044.12

Memo Item

**B. SWINSON, ANGELA, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 499 S CAPITOL ST SW STE 405

City WASHINGTON State DC Zip Code 20003-4018

Purpose of Disbursement PAYROLL WAGES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : B7643F27E95

Amount of Each Disbursement this Period: 1044.12

Memo Item

**C. GUSTO**

Full Name (Last, First, Middle Initial)

Mailing Address 525 20TH STREET

City SAN FRANCISCO State CA Zip Code 94121-3122

Purpose of Disbursement PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : B0310380E1

Amount of Each Disbursement this Period: 119.05

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1163.17

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. GUSTO</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020	
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED]	
City SAN FRANCISCO	State CA	Zip Code 94121-3122	Transaction ID : <b>BEECD20A8I</b>
Purpose of Disbursement PAYROLL WAGES		Category/ Type 001	Amount of Each Disbursement this Period 430.15
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:			

Full Name (Last, First, Middle Initial) <b>B. PHILLIPS, MARAINA, , ,</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020	
Mailing Address 2910 NE 8TH AVE		FEC Identification Number C [REDACTED]	
City POMPANO BEACH	State FL	Zip Code 33064-5330	Transaction ID : <b>BE2DF022B1I</b>
Purpose of Disbursement PAYROLL		Category/ Type 001	Amount of Each Disbursement this Period 430.15
Candidate Name		<input checked="" 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:			

Full Name (Last, First, Middle Initial) <b>C. GUSTO</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2020	
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED]	
City SAN FRANCISCO	State CA	Zip Code 94121-3122	Transaction ID : <b>B37BEE7E2I</b>
Purpose of Disbursement PAYROLL WAGES		Category/ Type 001	Amount of Each Disbursement this Period 600.00
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).....▶	1030.15
<b>TOTAL</b> 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)  
**NEW JOURNEY PAC, INC.**

**A. CROSS, PATRICK, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 250 LEGATE HILL RD

City LEOMINSTER State MA Zip Code 01453-5237

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : B9CEA9A5F0

Amount of Each Disbursement this Period: 600.00

Memo Item

**B. GUSTO**

Full Name (Last, First, Middle Initial)

Mailing Address 525 20TH STREET

City SAN FRANCISCO State CA Zip Code 94121-3122

Purpose of Disbursement PAYROLL WAGES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : B85F4886C5E

Amount of Each Disbursement this Period: 346.15

Memo Item

**C. WILLIAMS, DAREN, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 9318 OWINGS CHOICE CT

City OWINGS MILLS State MD Zip Code 21117-6344

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2020

FEC Identification Number: C

Transaction ID : B2CE1843C4

Amount of Each Disbursement this Period: 346.15

Memo Item

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

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

346.15

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. GUSTO</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2020
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : B7E4AEA871</b> Amount of Each Disbursement this Period [REDACTED] 659.87
City SAN FRANCISCO	State CA	Zip Code 94121-3122
Purpose of Disbursement PAYROLL WAGES		<input type="checkbox"/> 001 Category/ Type
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:		

Full Name (Last, First, Middle Initial) <b>B. WATSON, KAREN, , ,</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2020
Mailing Address 4323 BEVERLY DRIVE		FEC Identification Number C [REDACTED] <b>Transaction ID : B162E8433E7</b> Amount of Each Disbursement this Period [REDACTED] 659.87
City DALLAS	State TX	Zip Code 75205-3022
Purpose of Disbursement PAYROLL		<input type="checkbox"/> 001 Category/ Type
Candidate Name		<input checked="" 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:		

Full Name (Last, First, Middle Initial) <b>C. GUSTO</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2020
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : BA68383778.</b> Amount of Each Disbursement this Period [REDACTED] 346.15
City SAN FRANCISCO	State CA	Zip Code 94121-3122
Purpose of Disbursement PAYROLL WAGES		<input type="checkbox"/> 001 Category/ Type
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).....▶	[REDACTED] 1006.02
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. WILLIAMS, DAREN, , ,</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2020
Mailing Address 9318 OWINGS CHOICE CT		FEC Identification Number C [REDACTED] <b>Transaction ID : B3DBD3E68F</b> Amount of Each Disbursement this Period [REDACTED] 346.15
City OWINGS MILLS	State MD	Zip Code 21117-6344
Purpose of Disbursement PAYROLL		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. GUSTO</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2020
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : BCC2837D4E</b> Amount of Each Disbursement this Period [REDACTED] 845.60
City SAN FRANCISCO	State CA	Zip Code 94121-3122
Purpose of Disbursement PAYROLL WAGES		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. SWINSO, ANGELA, , ,</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2020
Mailing Address 499 S CAPITOL ST SW STE 405		FEC Identification Number C [REDACTED] <b>Transaction ID : BE79633B6F</b> Amount of Each Disbursement this Period [REDACTED] 845.60
City WASHINGTON	State DC	Zip Code 20003-4018
Purpose of Disbursement PAYROLL WAGES		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

[REDACTED] 845.60

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. GUSTO</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2020	
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED]	
City SAN FRANCISCO	State CA	Zip Code 94121-3122	Transaction ID : <b>B615203958E</b>
Purpose of Disbursement PAYROLL WAGES		Category/Type 001	Amount of Each Disbursement this Period 160.00
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:			

Full Name (Last, First, Middle Initial) <b>B. SWINSON, AMBER, , ,</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2020	
Mailing Address 200 CAPSTONE DR UNIT 307		FEC Identification Number C [REDACTED]	
City LYNCHBURG	State VA	Zip Code 24502-5198	Transaction ID : <b>BA504543F45</b>
Purpose of Disbursement PAYROLL		Category/Type 001	Amount of Each Disbursement this Period 160.00
Candidate Name		<input checked="" 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:			

Full Name (Last, First, Middle Initial) <b>C. GUSTO</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2020	
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED]	
City SAN FRANCISCO	State CA	Zip Code 94121-3122	Transaction ID : <b>B59832ACB5</b>
Purpose of Disbursement PAYROLL TAXES		Category/Type 001	Amount of Each Disbursement this Period 119.07
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:			

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

279.07

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. GUSTO</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2020
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : B84D6F8A71</b> Amount of Each Disbursement this Period [REDACTED] 430.14
City SAN FRANCISCO	State CA	Zip Code 94121-3122
Purpose of Disbursement PAYROLL WAGES		<input type="checkbox"/> 001 Category/ Type
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: _____	

Full Name (Last, First, Middle Initial) <b>B. PHILLIPS, MARAINA, , ,</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2020
Mailing Address 2910 NE 8TH AVE		FEC Identification Number C [REDACTED] <b>Transaction ID : BF2F19720C9</b> Amount of Each Disbursement this Period [REDACTED] 430.14
City POMPANO BEACH	State FL	Zip Code 33064-5330
Purpose of Disbursement PAYROLL		<input type="checkbox"/> 001 Category/ Type
Candidate Name		<input checked="" 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: _____	

Full Name (Last, First, Middle Initial) <b>C. INVESTMENTS LIMITED</b>		Date of Disbursement MM / DD / YYYY 07 / 22 / 2020
Mailing Address 215 N. FEDERAL HWY		FEC Identification Number C [REDACTED] <b>Transaction ID : B24BF1C18A</b> Amount of Each Disbursement this Period [REDACTED] 2500.00
City BOCA RATON	State FL	Zip Code 33432
Purpose of Disbursement RENT		<input type="checkbox"/> 001 Category/ Type
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).....▶	[REDACTED] 2930.14
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. INVESTMENTS LIMITED**

Mailing Address 215 N. FEDERAL HWY

City  
BOCA RATON

State  
FL

Zip Code  
33432

Purpose of Disbursement  
RENT

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B33665BA2A**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. INVESTMENTS LIMITED**

Mailing Address 215 N. FEDERAL HWY

City  
BOCA RATON

State  
FL

Zip Code  
33432

Purpose of Disbursement  
RENT

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B3F47F8F254**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. INVESTMENTS LIMITED**

Mailing Address 215 N. FEDERAL HWY

City  
BOCA RATON

State  
FL

Zip Code  
33432

Purpose of Disbursement  
RENT

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : BC9C7F9FE!**  
Amount of Each Disbursement this Period

Memo Item

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

**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)  
**NEW JOURNEY PAC, INC.**

**A. LADEN, LUKA, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 25 HIGH ST

City PORTLAND State ME Zip Code 04101-5146

Purpose of Disbursement PAC STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 09 / 2020

FEC Identification Number: C

Transaction ID : B5387A62F1

Amount of Each Disbursement this Period: 500.00

Memo Item

**B. LYFT**

Full Name (Last, First, Middle Initial)

Mailing Address 548 MARKET STREET SUITE 68514

City SAN FRANCISCO State CA Zip Code 94104

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 03 / 2020

FEC Identification Number: C

Transaction ID : B4A69FF6F81

Amount of Each Disbursement this Period: 26.67

Memo Item

**C. LYFT**

Full Name (Last, First, Middle Initial)

Mailing Address 548 MARKET STREET SUITE 68514

City SAN FRANCISCO State CA Zip Code 94104

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 03 / 2020

FEC Identification Number: C

Transaction ID : BA8E227994

Amount of Each Disbursement this Period: 30.82

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 557.49

**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)  
**NEW JOURNEY PAC, INC.**

**A. MDI IMAGING & MAIL**

Full Name (Last, First, Middle Initial)

Mailing Address 21955 CASCADES PARKWAY

City STERLING State VA Zip Code 20166-9211

Purpose of Disbursement POSTAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 13 / 2020

FEC Identification Number: C

Transaction ID : BC0883361E

Amount of Each Disbursement this Period: 1950.00

Memo Item

**B. MDI IMAGING & MAIL**

Full Name (Last, First, Middle Initial)

Mailing Address 21955 CASCADES PARKWAY

City STERLING State VA Zip Code 20166-9211

Purpose of Disbursement POSTAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 20 / 2020

FEC Identification Number: C

Transaction ID : B347C34129A

Amount of Each Disbursement this Period: 21700.45

Memo Item

**C. OMEGA LIST COMPANY**

Full Name (Last, First, Middle Initial)

Mailing Address 1420 SPRING HILL ROAD

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement LIST RENTAL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 06 / 2020

FEC Identification Number: C

Transaction ID : B26C348794

Amount of Each Disbursement this Period: 4640.63

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 28291.08

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2020
Mailing Address 1420 SPRING HILL ROAD		FEC Identification Number C [REDACTED] <b>Transaction ID : B69BF5CCAE</b> Amount of Each Disbursement this Period 4080.94
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement LIST RENTAL		Category/Type 001
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>B. PHILLIPS, MARAINA, , ,</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2020
Mailing Address 2910 NE 8TH AVE		FEC Identification Number C [REDACTED] <b>Transaction ID : B504035F2A4</b> Amount of Each Disbursement this Period 420.00
City POMPANO BEACH	State FL	Zip Code 33064-5330
Purpose of Disbursement PAC STRATEGY CONSULTING		Category/Type 001
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>C. PROFESSIONAL BANK</b>		Date of Disbursement MM / DD / YYYY 07 / 17 / 2020
Mailing Address 625 NORTH FLAGLER DRIVE SUITE 509		FEC Identification Number C [REDACTED] <b>Transaction ID : B724F71D87</b> Amount of Each Disbursement this Period 10.00
City WEST PALM BEACH	State FL	Zip Code 33401
Purpose of Disbursement BANK FEES		Category/Type 001
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4510.94
<b>TOTAL</b> 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)  
**NEW JOURNEY PAC, INC.**

**A. PROFESSIONAL BANK**

Full Name (Last, First, Middle Initial)

Mailing Address 625 NORTH FLAGLER DRIVE  
SUITE 509

City WEST PALM BEACH State FL Zip Code 33401

Purpose of Disbursement BANK FEES Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 07 / 27 / 2020

FEC Identification Number C

Transaction ID : **BF2959E351E**

Amount of Each Disbursement this Period 19.95

Memo Item

**B. PROFESSIONAL BANK**

Full Name (Last, First, Middle Initial)

Mailing Address 625 NORTH FLAGLER DRIVE  
SUITE 509

City WEST PALM BEACH State FL Zip Code 33401

Purpose of Disbursement BANK FEES Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 07 / 31 / 2020

FEC Identification Number C

Transaction ID : **B6E3FC81D4**

Amount of Each Disbursement this Period 8.20

Memo Item

**C. PRUITT AND WALL, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 124 BROADKILL ROAD STREET  
SUITE 449

City MILTON State DE Zip Code 19968

Purpose of Disbursement PAC STRATEGY CONSULTING Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 07 / 06 / 2020

FEC Identification Number C

Transaction ID : **BDEFEF994E**

Amount of Each Disbursement this Period 2000.00

Memo Item

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

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

2028.15



# 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)  
**NEW JOURNEY PAC, INC.**

**A. PRUITT AND WALL, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 124 BROADKILL ROAD STREET  
SUITE 449

City MILTON State DE Zip Code 19968

Purpose of Disbursement PAC STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Date of Disbursement: 07 / 13 / 2020

FEC Identification Number: C

Transaction ID : B48866B304C

Amount of Each Disbursement this Period: 5000.00

Memo Item

**B. PRUITT AND WALL, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 124 BROADKILL ROAD STREET  
SUITE 449

City MILTON State DE Zip Code 19968

Purpose of Disbursement PAC STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Date of Disbursement: 07 / 13 / 2020

FEC Identification Number: C

Transaction ID : BA4CF43CA0

Amount of Each Disbursement this Period: 5000.00

Memo Item

**C. PRUITT AND WALL, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 124 BROADKILL ROAD STREET  
SUITE 449

City MILTON State DE Zip Code 19968

Purpose of Disbursement PAC STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Date of Disbursement: 07 / 17 / 2020

FEC Identification Number: C

Transaction ID : B78DAD1762

Amount of Each Disbursement this Period: 2500.00

Memo Item

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

12500.00

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. PRUITT AND WALL, LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 21 / 2020
Mailing Address 124 BROADKILL ROAD STREET SUITE 449		FEC Identification Number C [REDACTED] <b>Transaction ID : B237CAC871</b>
City MILTON	State DE	Zip Code 19968
Purpose of Disbursement PAC STRATEGY CONSULTING		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 3000.00
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>B. PRUITT AND WALL, LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 29 / 2020
Mailing Address 124 BROADKILL ROAD STREET SUITE 449		FEC Identification Number C [REDACTED] <b>Transaction ID : B2E1639CE71</b>
City MILTON	State DE	Zip Code 19968
Purpose of Disbursement PAC STRATEGY CONSULTING		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 7500.00
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>C. RST MARKETING</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2020
Mailing Address ' 1272 CORPORATE PARK ROAD '		FEC Identification Number C [REDACTED] <b>Transaction ID : B195C7C9E1</b>
City FOREST	State VA	Zip Code 24551-2277
Purpose of Disbursement POSTAGE		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 6100.00
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)..... ▶

16600.00

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. RST MARKETING**

Mailing Address ' 1272 CORPORATE PARK ROAD '

City FOREST State VA Zip Code 24551-2277

Purpose of Disbursement  
POSTAGE

Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
07 / 20 / 2020

FEC Identification Number  
  
**Transaction ID : B49B928DBD**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. SASQUATCH**

Mailing Address 1001 S MACDILL AVE SUITE 600

City TAMPA State FL Zip Code 33629

Purpose of Disbursement  
MEDIA PLACEMENT

Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
07 / 01 / 2020

FEC Identification Number  
  
**Transaction ID : B24A3B3630f**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. SASQUATCH**

Mailing Address 1001 S MACDILL AVE SUITE 600

City TAMPA State FL Zip Code 33629

Purpose of Disbursement  
MEDIA PLACEMENT

Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
07 / 21 / 2020

FEC Identification Number  
  
**Transaction ID : B8AF2C3B9f**  
Amount of Each Disbursement this Period

Memo Item

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

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. SASQUATCH</b>		Date of Disbursement MM / DD / YYYY 07 / 21 / 2020
Mailing Address 1001 S MACDILL AVE SUITE 600		FEC Identification Number C [REDACTED] <b>Transaction ID : B453774778C</b> Amount of Each Disbursement this Period 500.00
City TAMPA	State FL	Zip Code 33629
Purpose of Disbursement MEDIA PLACEMENT		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. SASQUATCH</b>		Date of Disbursement MM / DD / YYYY 07 / 28 / 2020
Mailing Address 1001 S MACDILL AVE SUITE 600		FEC Identification Number C [REDACTED] <b>Transaction ID : B64775508EE</b> Amount of Each Disbursement this Period 500.00
City TAMPA	State FL	Zip Code 33629
Purpose of Disbursement MEDIA PLACEMENT		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. SASQUATCH</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2020
Mailing Address 1001 S MACDILL AVE SUITE 600		FEC Identification Number C [REDACTED] <b>Transaction ID : B022E01496;</b> Amount of Each Disbursement this Period 500.00
City TAMPA	State FL	Zip Code 33629
Purpose of Disbursement MEDIA PLACEMENT		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	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1500.00
<b>TOTAL</b> 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)  
**NEW JOURNEY PAC, INC.**

**A. SWINSO, ANGELA, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 499 S CAPITOL ST SW  
STE 405

City WASHINGTON State DC Zip Code 20003-4018

Purpose of Disbursement PAC STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 01 / 2020

FEC Identification Number: C

Transaction ID : B3E5D602D5

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. TABLE 26**

Full Name (Last, First, Middle Initial)

Mailing Address 1700 S DIXIE HWY

City WEST PALM BEACH State FL Zip Code 33401-7304

Purpose of Disbursement FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 22 / 2020

FEC Identification Number: C

Transaction ID : BAF5DC7B7E

Amount of Each Disbursement this Period: 342.48

Memo Item

**C. THE JOULE**

Full Name (Last, First, Middle Initial)

Mailing Address 1530 MAIN STREET

City DALLAS State TX Zip Code 75201-4804

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 03 / 2020

FEC Identification Number: C

Transaction ID : BDCDA49F0i

Amount of Each Disbursement this Period: 27.06

Memo Item

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

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

1369.54

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. THE JOULE**

Mailing Address 1530 MAIN STREET

City  
DALLAS

State  
TX

Zip Code  
75201-4804

Purpose of Disbursement  
TRAVEL

001

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  
07 / 03 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : BC9BCD14AI  
Amount of Each Disbursement this Period

[REDACTED] 3129.59

Memo Item

Full Name (Last, First, Middle Initial)

**B. TJ'S FRESH SEAFOOD**

Mailing Address 6025 PRESTON RD

City  
DALLAS

State  
TX

Zip Code  
75205-2019

Purpose of Disbursement  
FOOD AND BEVERAGE

001

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  
07 / 23 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : BF14F3AB15I  
Amount of Each Disbursement this Period

[REDACTED] 245.13

Memo Item

Full Name (Last, First, Middle Initial)

**C. UPWORK.COM**

Mailing Address 475 BRANNAN STREET, SUITE 430

City  
SAN FRANCISCO

State  
CA

Zip Code  
94107

Purpose of Disbursement  
OFFICE SUPPLIES

001

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  
07 / 08 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : BD14184C9C  
Amount of Each Disbursement this Period

[REDACTED] 49.99

Memo Item

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

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

[REDACTED] 3424.71

[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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. UPWORK.COM**

Mailing Address 475 BRANNAN STREET, SUITE 430

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement OFFICE SUPPLIES

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  
 07 / 15 / 2020

FEC Identification Number  
  
**Transaction ID : B40789D9C3I**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. UPWORK.COM**

Mailing Address 475 BRANNAN STREET, SUITE 430

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement OFFICE SUPPLIES

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  
 07 / 21 / 2020

FEC Identification Number  
  
**Transaction ID : B4D39DFA2B**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. UPWORK.COM**

Mailing Address 475 BRANNAN STREET, SUITE 430

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement OFFICE SUPPLIES

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  
 07 / 28 / 2020

FEC Identification Number  
  
**Transaction ID : B69144FD52**  
 Amount of Each Disbursement this Period

Memo Item

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

**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

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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. VISTAPRINT**

Mailing Address 95 HAYDEN AVE

City  
LEXINGTON

State  
MA

Zip Code  
02421-7942

Purpose of Disbursement  
OFFICE SUPPLIES

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 09 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : B2292059092

Amount of Each Disbursement this Period

[REDACTED] 127.85

Memo Item

Full Name (Last, First, Middle Initial)

**B. VISTAPRINT**

Mailing Address 95 HAYDEN AVE

City  
LEXINGTON

State  
MA

Zip Code  
02421-7942

Purpose of Disbursement  
OFFICE SUPPLIES

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 21 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : BE5E9B1B2D

Amount of Each Disbursement this Period

[REDACTED] 93.08

Memo Item

Full Name (Last, First, Middle Initial)

**C. WARWICK MELROSE**

Mailing Address 3015 OAK LAWN AVE

City  
DALLAS

State  
TX

Zip Code  
75219

Purpose of Disbursement  
TRAVEL

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 27 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : B6F19EEDFC

Amount of Each Disbursement this Period

[REDACTED] 486.74

Memo Item

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

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

[REDACTED] 707.67

[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)  
**NEW JOURNEY PAC, INC.**

**A. WARWICK MELROSE**

Full Name (Last, First, Middle Initial)

Mailing Address 3015 OAK LAWN AVE

City DALLAS State TX Zip Code 75219

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 27 / 2020

FEC Identification Number: C

Transaction ID : B5FFBE55F4

Amount of Each Disbursement this Period: 203.45

Memo Item

**B. WARWICK MELROSE**

Full Name (Last, First, Middle Initial)

Mailing Address 3015 OAK LAWN AVE

City DALLAS State TX Zip Code 75219

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 27 / 2020

FEC Identification Number: C

Transaction ID : BB20986965E

Amount of Each Disbursement this Period: 127.23

Memo Item

**C. WASHINGTON INTELLIGENCE BUREAU**

Full Name (Last, First, Middle Initial)

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement DIRECT MAIL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 06 / 2020

FEC Identification Number: C

Transaction ID : B7F059D79B

Amount of Each Disbursement this Period: 1928.83

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2259.51

**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

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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. ZIP MAILING SERVICES, INC.</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2020	
Mailing Address ' 6304 SHERIFF RD. STE Z '			
City HYATTSVILLE	State MD	Zip Code 20785-4361	
Purpose of Disbursement POSTAGE		Category/ Type 001	
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: _____	Amount of Each Disbursement this Period 3921.64		
<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		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: _____	Amount of Each Disbursement this Period		
<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		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: _____	Amount of Each Disbursement this Period		
<input type="checkbox"/> Memo Item			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3921.64
<b>TOTAL</b> This Period (last page this line number only).....▶	224635.52

**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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. SCHROEDER, SHAWN, , ,</b>		Date of Disbursement MM / DD / YYYY 07 / 06 / 2020	
Mailing Address 672 MARBLE ROCK CIRCLE		FEC Identification Number C [ ] <b>Transaction ID : B505B1B37C</b> Amount of Each Disbursement this Period [ ] 10.00	
City GREEN BAY	State WI	Zip Code 54311-6947	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [ ] Amount of Each Disbursement this Period [ ]	
City	State	Zip Code	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>C.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [ ] Amount of Each Disbursement this Period [ ]	
City	State	Zip Code	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		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 10.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ] 10.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 140 OF 146
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT</b>			Nature of Debt (Purpose): LIST RENTAL
Mailing Address 113 EAST MARKET STREET 300			
City LEESBURG	State VA	Zip Code 20176-3109	

Outstanding Balance Beginning This Period	Transaction ID : <b>DDABC5BABCA9144DCB3</b>	
<input type="text" value="290.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="290.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>BELIEVE MEDIA LLC</b>			Nature of Debt (Purpose): DIGITAL ADS
Mailing Address 10660 PAGE AVE #65			
City FAIRFAX	State VA	Zip Code 22038-8205	

Outstanding Balance Beginning This Period	Transaction ID : <b>DA1B3E3B7EA514293981</b>	
<input type="text" value="5763.10"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="5763.10"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>DAMIVADA THE PROMOTIONAL PRODUCTS COMPANY</b>			Nature of Debt (Purpose): PAC STRATEGY CONSULTING
Mailing Address 327 FOREST BEND DRIVE			
City MOUNT JULIET	State TN	Zip Code 37122	

Outstanding Balance Beginning This Period	Transaction ID : <b>DD75A142E89034374AB1</b>	
<input type="text" value="3983.28"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="3983.28"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="10036.38"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 141 OF 146
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>FOLEY AND LARDNER LLP</b>			Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address 3000 K STREET NW SUITE 600			
City WASHINGTON	State DC	Zip Code 20007	

Outstanding Balance Beginning This Period 243.00	Transaction ID : D9E40796F25F24A19885	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 243.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>GOLDEN CREATIVE</b>			Nature of Debt (Purpose): PAC STRATEGY CONSULTING
Mailing Address 856 ESTER AVENUE			
City TEANECK	State NJ	Zip Code 07666	

Outstanding Balance Beginning This Period 48322.67	Transaction ID : DAD7EDF40181B4DC9A3F	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 48322.67

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>GOLDEN CREATIVE</b>			Nature of Debt (Purpose): PAC STRATEGY CONSULTING
Mailing Address 856 ESTER AVENUE			
City TEANECK	State NJ	Zip Code 07666	

Outstanding Balance Beginning This Period 2650.00	Transaction ID : D0FA42858A89C4398B70	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2650.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	51215.67
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 142 OF 146
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>GOLDEN CREATIVE</b>			Nature of Debt (Purpose): PAC STRATEGY CONSULTING
Mailing Address 856 ESTER AVENUE			
City TEANECK	State NJ	Zip Code 07666	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DF9A64FDAF3EE47D9B57	
Amount Incurred This Period 46500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 46500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>HOGENSON COMMUNICATIONS, LLC</b>			Nature of Debt (Purpose): PAC COMMUNICATIONS CONSULTING
Mailing Address PO BOX 65023			
City PORT LUDLOW	State WA	Zip Code 98365	

Outstanding Balance Beginning This Period 30518.50	Transaction ID : D273733515BB847EE9C7	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 30518.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>HOGENSON COMMUNICATIONS, LLC</b>			Nature of Debt (Purpose): PAC COMMUNICATIONS CONSULTING
Mailing Address PO BOX 65023			
City PORT LUDLOW	State WA	Zip Code 98365	

Outstanding Balance Beginning This Period 7500.00	Transaction ID : D928C94C6294740DFA62	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7500.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	84518.50
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 143 OF 146
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>HOGENSON COMMUNICATIONS, LLC</b>			Nature of Debt (Purpose): PAC COMMUNICATIONS CONSULTING
Mailing Address PO BOX 65023			
City PORT LUDLOW	State WA	Zip Code 98365	

Outstanding Balance Beginning This Period		Transaction ID : D5F8BEE952FB84DE7992	
1000.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	1000.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>POLITICAL MEDIA, INC.</b>			Nature of Debt (Purpose): DIGITAL CONSULTING
Mailing Address 1750 TYSONS BOULEVARD, SUITE 1500			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period		Transaction ID : D296942272A294095BF3	
13613.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	13613.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>POLITICAL MEDIA, INC.</b>			Nature of Debt (Purpose): DIGITAL CONSULTING
Mailing Address 1750 TYSONS BOULEVARD, SUITE 1500			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period		Transaction ID : DBBDEEB216CE24B32830	
17407.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	17407.00	

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	32020.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 144 OF 146
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>PRUITT AND WALL, LLC</b>			Nature of Debt (Purpose): PAC STRATEGY CONSULTING
Mailing Address 124 BROADKILL ROAD STREET SUITE 449			
City MILTON	State DE	Zip Code 19968	

Outstanding Balance Beginning This Period 53559.92	Transaction ID : DCCD95CAE63584EFAA86	
Amount Incurred This Period 0.00	Payment This Period 25000.00	Outstanding Balance at Close of This Period 28559.92

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>PRUITT AND WALL, LLC</b>			Nature of Debt (Purpose): PAC STRATEGY CONSULTING
Mailing Address 124 BROADKILL ROAD STREET SUITE 449			
City MILTON	State DE	Zip Code 19968	

Outstanding Balance Beginning This Period 62234.96	Transaction ID : DDEC6ABF27284433D9E0	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 62234.96

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>PRUITT AND WALL, LLC</b>			Nature of Debt (Purpose): PAC STRATEGY CONSULTING
Mailing Address 124 BROADKILL ROAD STREET SUITE 449			
City MILTON	State DE	Zip Code 19968	

Outstanding Balance Beginning This Period 6349.87	Transaction ID : DB98629C886FA46D08C6	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6349.87

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	97144.75
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	



**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 145 OF 146
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>PRUITT AND WALL, LLC</b>			Nature of Debt (Purpose): PAC STRATEGY CONSULTING
Mailing Address 124 BROADKILL ROAD STREET SUITE 449			
City MILTON	State DE	Zip Code 19968	

Outstanding Balance Beginning This Period 15214.59	Transaction ID : D1A1338A56D8942A4993	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 15214.59

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>SASQUATCH</b>			Nature of Debt (Purpose): MEDIA PLACEMENT
Mailing Address 1001 S MACDILL AVE SUITE 600			
City TAMPA	State FL	Zip Code 33629	

Outstanding Balance Beginning This Period 25000.00	Transaction ID : D4E55920E28B141F29B0	
Amount Incurred This Period 0.00	Payment This Period 3000.00	Outstanding Balance at Close of This Period 22000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ULTIMATE CORPORATE ADVERTISING</b>			Nature of Debt (Purpose): MEDIA PRINT
Mailing Address 8211 W. BROWARD BLVD SUITE 350			
City PLANTATION	State FL	Zip Code 33324	

Outstanding Balance Beginning This Period 9000.00	Transaction ID : D262274CA38124A47800	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 9000.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	46214.59
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 146 OF 146
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>WEBSTER, CHAMBERLAIN &amp; BEAN, LLP</b>			Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address 1747 PENNSYLVANIA AVE, NW SUITE 1000			
City WASHINGTON	State DC	Zip Code 20006	

Outstanding Balance Beginning This Period		Transaction ID : D96E31F4C4568453B8F2	
3305.80			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	3305.80	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>WEBSTER, CHAMBERLAIN &amp; BEAN, LLP</b>			Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address 1747 PENNSYLVANIA AVE, NW SUITE 1000			
City WASHINGTON	State DC	Zip Code 20006	

Outstanding Balance Beginning This Period		Transaction ID : D360C2B0274BD4CDDBC8	
382.55			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	382.55	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	3688.35
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	324838.24
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	324838.24