

# 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**  
**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

ADDRESS (number and street) **C/O BULLDOG COMPLIANCE**  
**138 CONANT STREET STE 202**  
 Check if different than previously reported. (ACC) **BEVERLY MA 01915**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00790477** 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  /  /  2021 through  /  /  2021

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

Signature of Treasurer **GANTT, CHARLES, , ,** [Electronically Filed] Date  /  /  2022

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**MAKE AMERICA GREAT AGAIN, AGAIN! 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="2021"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="10025291.60"/>	<input type="text" value="10025291.60"/>
(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="10025291.60"/>	<input type="text" value="10025291.60"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="476577.27"/>	<input type="text" value="476577.27"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="9548714.33"/>	<input type="text" value="9548714.33"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4300250.00	4300250.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4300250.00	4300250.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5725000.00	5725000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	10025250.00	10025250.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	41.60	41.60
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)).....▶	10025291.60	10025291.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	10025291.60	10025291.60

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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 .....	476577.27	476577.27
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	476577.27	476577.27
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	476577.27	476577.27
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	476577.27	476577.27

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

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) .....	10025250.00	10025250.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10025250.00	10025250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	476577.27	476577.27
37. Offsets to Operating Expenditures (from Line 15, page 3).....	41.60	41.60
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	476535.67	476535.67

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 34
	(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)  
**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

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

Mailing Address 407 TRANQUIL PEAK CT

City HENDERSON	State NV	Zip Code 89012
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AHERN RENTALS, INC.	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	07	/	2021

**Transaction ID : SA11AI.4152**

Amount of Each Receipt this Period  

250000.00
-----------

 Memo Item

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

Mailing Address 1281 W. TORTOLITA MT. CIRCLE

City ORO VALLEY	State AZ	Zip Code 85755
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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 ▼  
250000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	29	/	2021

**Transaction ID : SA11AI.4147**

Amount of Each Receipt this Period  

250000.00
-----------

 Memo Item

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

Mailing Address 119 EVANS LN.

City LANTANA	State FL	Zip Code 33462
-----------------	-------------	-------------------

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 ▼  
10000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2021

**Transaction ID : SA11AI.4116**

Amount of Each Receipt this Period  

10000.00
----------

 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	510000.00
<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 34
	<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)  
**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

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

Mailing Address 1 N CLEMATIS ST.

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

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

Name of Employer (for Individual) FLORIDA CRYSTALS	Occupation (for Individual) CHAIRMAN
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
125000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		06		2021

**Transaction ID : SA11AI.4149**

Amount of Each Receipt this Period  
125000.00

Memo Item

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

Mailing Address 1 N CLEMATIS ST.

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

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

Name of Employer (for Individual) FLORIDA CRYSTALS	Occupation (for Individual) CHAIRMAN
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		06		2021

**Transaction ID : SA11AI.4150**

Amount of Each Receipt this Period  
125000.00

Memo Item

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

Mailing Address 2105 WOODSIDE RD.

City WOODSIDE	State CA	Zip Code 94062
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2021

**Transaction ID : SA11AI.4137**

Amount of Each Receipt this Period  
250000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 34
	(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)  
**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

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

Mailing Address 602 PINEHAVEN

City HOUSTON	State TX	Zip Code 77024
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2021

**Transaction ID : SA11AI.4164**

Amount of Each Receipt this Period  
250000.00

Memo Item

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

Mailing Address 11614 VERSAILLES LAKES LANE

City HOUSTON	State TX	Zip Code 77082
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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 ▼  
100000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2021

**Transaction ID : SA11AI.4128**

Amount of Each Receipt this Period  
100000.00

Memo Item

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

Mailing Address 10111 BELLA STRADA LN.

City JOHNSTON	State IA	Zip Code 50131
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ACCUMOLD	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	14	/	2021

**Transaction ID : SA11AI.4107**

Amount of Each Receipt this Period  
3000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	353000.00
<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 34
	<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)  
**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

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

Mailing Address P.O. BOX 65

City AFTON	State WI	Zip Code 53501
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HENDRICKS HOLDING CO., INC.	Occupation (for Individual) CHAIRPERSON OF THE BOARD
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2021

**Transaction ID : SA11AI.4154**

Amount of Each Receipt this Period  
250000.00

Memo Item

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

Mailing Address 4 SUNNINGDALE DR.

City ST. LOUIS	State MO	Zip Code 63124
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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 ▼  
25000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2021

**Transaction ID : SA11AI.4111**

Amount of Each Receipt this Period  
25000.00

Memo Item

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

Mailing Address 1305 NE 53RD CT

City ANKENY	State IA	Zip Code 50021
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	08	/	2021

**Transaction ID : SA11AI.4105**

Amount of Each Receipt this Period  
2000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	277000.00
<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 10 OF 34  
(check only one)

<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)  
**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

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

Mailing Address 651 ROBERT JACKSON RD.

City CHATSWORTH	State GA	Zip Code 30705
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INGLE SALES ASSOCIATES	Occupation (for Individual) PRESIDENT
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		15		2021

**Transaction ID : SA11AI.4135**

Amount of Each Receipt this Period  
25000.00

Memo Item

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

Mailing Address 1003 WEST PARK AVE.

City LIBERTYVILLE	State IL	Zip Code 60048
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KOFFEL MEDICAL SUPPLIES	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
125000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		01		2021

**Transaction ID : SA11AI.4120**

Amount of Each Receipt this Period  
125000.00

Memo Item

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

Mailing Address 1003 WEST PARK AVE.

City LIBERTYVILLE	State IL	Zip Code 60048
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KOFFEL MEDICAL SUPPLIES	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
150000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		11		2021

**Transaction ID : SA11AI.4133**

Amount of Each Receipt this Period  
25000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	175000.00
<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 34
<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)  
**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

**A. LIAUTAUD, LESLIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4224 TWO RIVERS LN.  
 City FRANKLIN State TN Zip Code 37069  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) AUTHOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250000.00

Date of Receipt 11 / 04 / 2021  
**Transaction ID : SA11AI.4124**  
 Amount of Each Receipt this Period 250000.00  
 Memo Item

**B. LOMANGINO, ANTHONY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1620 S OCEAN BLVD  
 City PALM BEACH State FL Zip Code 33480  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) RECYCLING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250000.00

Date of Receipt 11 / 24 / 2021  
**Transaction ID : SA11AI.4145**  
 Amount of Each Receipt this Period 250000.00  
 Memo Item

**C. LUND, TOM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5150 TAMIAMI TRL N  
 City NAPLES State FL Zip Code 34103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LUND CAPITAL Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 10 / 18 / 2021  
**Transaction ID : SA11AI.4113**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	525000.00
<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 12 OF 34
<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)  
**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

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

Mailing Address 5150 TAMIAMI TRL N

City NAPLES	State FL	Zip Code 34103
----------------	-------------	-------------------

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

Name of Employer (for Individual) LUND CAPITAL	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2021

**Transaction ID : SA11AI.4114**

Amount of Each Receipt this Period  
25000.00

Memo Item

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

Mailing Address 1330 LAKE ROBBINS DRIVE  
SUITE 100

City THE WOOLANDS	State TX	Zip Code 77380
----------------------	-------------	-------------------

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

Name of Employer (for Individual) WOODFOREST CHARITABLE FOUNDATION	Occupation (for Individual) EXECUTIVE DIRECTOR
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
125000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2021

**Transaction ID : SA11AI.4262**

Amount of Each Receipt this Period  
125000.00

Memo Item  
PARTNERSHIP ATTRIBUTION [SA11A:4130]

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

Mailing Address 1330 LAKE ROBBINS DRIVE  
SUITE 100

City THE WOOLANDS	State TX	Zip Code 77380
----------------------	-------------	-------------------

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

Name of Employer (for Individual) WOODFOREST FINANCIAL GROUP	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
125000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2021

**Transaction ID : SA11AI.4260**

Amount of Each Receipt this Period  
125000.00

Memo Item  
PARTNERSHIP ATTRIBUTION [SA11A:4130]

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25000.00
<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 34
	<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)  
**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

**A. MIDDLETON, D MAYES, , , II**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 273

City WALLISVILLE	State TX	Zip Code 77597
---------------------	-------------	-------------------

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

Name of Employer (for Individual) MIDDLETON OIL CO	Occupation (for Individual) OIL AND GAS
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2021

**Transaction ID : SA11AI.4160**

Amount of Each Receipt this Period  
250000.00

Memo Item

**B. ML ORGANIZATION LLC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2377 E SILVER PALM RD.

City BOCA RATON	State FL	Zip Code 33432
--------------------	-------------	-------------------

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 ▼  
500000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2021

**Transaction ID : SA11AI.4122**

Amount of Each Receipt this Period  
500000.00

Memo Item  
PARTNERSHIP: SEE ATTRIBUTION [SA11AI.5001]

**C. NORTH POINT MERGERS AND AQUISITIONS, INC.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 580 CALIFORNIA ST.  
SUITE 2000

City SAN FRANCISCO	State CA	Zip Code 94104
-----------------------	-------------	-------------------

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 ▼  
100000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	17	/	2021

**Transaction ID : SA11AI.4156**

Amount of Each Receipt this Period  
100000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 34
<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)  
**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

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

Mailing Address 230 S. DIXIE HIGHWAY

City BOCA RATON	State FL	Zip Code 33432
--------------------	-------------	-------------------

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

Name of Employer (for Individual) ML ORGANIZATION LLC	Occupation (for Individual) VICE PRESIDENT
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2021

**Transaction ID : SA11AI.5001**

Amount of Each Receipt this Period  

500000.00
-----------

Memo Item  
 PARTNERSHIP ATTRIBUTION: ML ORGANIZATION LLC [SA11AI.4122]

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

Mailing Address 1305 SOUTHWEST 37TH ST.

City GRIMES	State IA	Zip Code 50111
----------------	-------------	-------------------

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

Name of Employer (for Individual) RENDA ELECTRIC	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00
---------

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	14	/	2021

**Transaction ID : SA11AI.4109**

Amount of Each Receipt this Period  

3000.00
---------

Memo Item

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

Mailing Address 3308 PRESTON RD.  
350-164

City PLANO	State TX	Zip Code 75093
---------------	-------------	-------------------

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

Name of Employer (for Individual) ROMANYK CONSULTING CORP	Occupation (for Individual) PRESIDENT/CEO
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

25000.00
----------

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2021

**Transaction ID : SA11AI.4126**

Amount of Each Receipt this Period  

25000.00
----------

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	28000.00
<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 15 OF 34
<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)  
**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

**A. ROWLAND, WILLIAM, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1531 NANTUCKET DR  
 City HOUSTON State TX Zip Code 77057  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) W.W. ROWLAND TRUCKING CO. Occupation (for Individual) OWNER AND FOUNDER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt **12 / 23 / 2021**  
**Transaction ID : SA11AI.4158**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item

**B. SPIEGEL, ALBERT, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23276 KRESS LN.  
 City SHERRILL State IA Zip Code 52073  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MI-T-M CORP. Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 22000.00

Date of Receipt **10 / 07 / 2021**  
**Transaction ID : SA11AI.4103**  
 Amount of Each Receipt this Period 22000.00  
 Memo Item

**C. TRANQUIL PATH INVESTMENTS, LTD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1330 LAKE ROBBINS DRIVE SUITE 100  
 City THE WOODLANDS State TX Zip Code 77380  
 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 ▼ 500000.00

Date of Receipt **11 / 09 / 2021**  
**Transaction ID : SA11AI.4130**  
 Amount of Each Receipt this Period 500000.00  
 Memo Item  
 SEE PARTNERSHIP ATTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	547000.00
<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 34
	(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)  
**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

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

Mailing Address 10595 STRAIT LN

City DALLAS	State TX	Zip Code 75229
----------------	-------------	-------------------

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

Name of Employer (for Individual) MT. VERNON INVESTMENTS	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		23		2021

**Transaction ID : SA11AI.4141**

Amount of Each Receipt this Period  
250000.00

Memo Item

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

Mailing Address 26501 SOUTH TAMIAMI TRAIL

City BONITA SPRINGS	State FL	Zip Code 34134
------------------------	-------------	-------------------

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

Name of Employer (for Individual) BENECARD HOLDINGS	Occupation (for Individual) CHAIRMAN
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		11		2021

**Transaction ID : SA11AI.4132**

Amount of Each Receipt this Period  
25000.00

Memo Item

**C. WARD, MARK, V, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18830 WINDWARD LN

City HOUSTON	State TX	Zip Code 77058
-----------------	-------------	-------------------

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

Name of Employer (for Individual) MUSTANG SEAL SOLUTIONS	Occupation (for Individual) MANAGER
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
230000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		23		2021

**Transaction ID : SA11AI.4143**

Amount of Each Receipt this Period  
230000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	505000.00
<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 17 OF 34  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

**A. WOLD, ELAINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1515 S FEDERAL HWY  
 STE 201  
 City BOCA RATON State FL Zip Code 33432  
 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 / D D / Y Y Y Y Y Y  
 11 / 23 / 2021  
**Transaction ID : SA11AI.4139**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Z & A INFOTEK CORP**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 160 LITTLETON RD.  
 STE 300  
 City PARSIPPANY State NJ Zip Code 07054  
 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 ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2021  
**Transaction ID : SA11AI.4162**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5250.00
<b>TOTAL</b> This Period (last page this line number only).....	4300250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 34
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

**A. MAKE AMERICA GREAT AGAIN ACTION INC**

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

Mailing Address C/O BULLDOG COMPLIANCE  
138 CONANT STREET 2ND FLOOR

City BEVERLY	State MA	Zip Code 01915
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00771477

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5725000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		01		2021

**Transaction ID : SA11C.4101**

Amount of Each Receipt this Period  
5725000.00

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  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

**C.**

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5725000.00
<b>TOTAL</b> This Period (last page this line number only).....	5725000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address 5555 HILTON AVE SUITE 106

City  
BATON ROUGE

State  
LA

Zip Code  
70808

Purpose of Disbursement  
MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 19 / 2021

FEC Identification Number

C  
**Transaction ID : SB21B.4187**  
Amount of Each Disbursement this Period  
1240.90

Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address 5555 HILTON AVE SUITE 106

City  
BATON ROUGE

State  
LA

Zip Code  
70808

Purpose of Disbursement  
MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 21 / 2021

FEC Identification Number

C  
**Transaction ID : SB21B.4188**  
Amount of Each Disbursement this Period  
2000.60

Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address 5555 HILTON AVE SUITE 106

City  
BATON ROUGE

State  
LA

Zip Code  
70808

Purpose of Disbursement  
MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 25 / 2021

FEC Identification Number

C  
**Transaction ID : SB21B.4189**  
Amount of Each Disbursement this Period  
400.30

Memo Item

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

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

3641.80

**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)  
**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address 5555 HILTON AVE SUITE 106

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement  
MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 04 / 2021

FEC Identification Number

C  
Transaction ID : SB21B.4195  
Amount of Each Disbursement this Period  
5000.30

Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address 5555 HILTON AVE SUITE 106

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement  
MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 10 / 2021

FEC Identification Number

C  
Transaction ID : SB21B.4199  
Amount of Each Disbursement this Period  
5000.60

Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address 5555 HILTON AVE SUITE 106

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement  
MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 16 / 2021

FEC Identification Number

C  
Transaction ID : SB21B.4204  
Amount of Each Disbursement this Period  
2000.60

Memo Item

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

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

12001.50

**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)  
**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

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

Mailing Address 5555 HILTON AVE SUITE 106

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement  
MERCHANT FEE

Candidate Name

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

State: District:

Date of Disbursement  
MM / DD / YYYY  
12 / 08 / 2021

FEC Identification Number  
C [ ]  
Transaction ID : SB21B.4208  
Amount of Each Disbursement this Period  
10000.60

Memo Item

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

Mailing Address C/O BULLDOG COMPLIANCE  
138 CONANT STREET 2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement  
MAGA POLICIES, INC. COST SHARE AGREEMENT: SALARY  
[SB21B 41071]

Candidate Name

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

State: District:

Date of Disbursement  
MM / DD / YYYY  
11 / 09 / 2021

FEC Identification Number  
C [ ]  
Transaction ID : SB21B.4250  
Amount of Each Disbursement this Period  
20615.13

Memo Item

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

Mailing Address C/O BULLDOG COMPLIANCE  
138 CONANT STREET 2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement  
MAGA POLICIES, INC. COST SHARE AGREEMENT: SALARY  
[SB21B 42301]

Candidate Name

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

State: District:

Date of Disbursement  
MM / DD / YYYY  
12 / 28 / 2021

FEC Identification Number  
C [ ]  
Transaction ID : SB21B.4253  
Amount of Each Disbursement this Period  
7550.74

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 10000.60

**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)  
**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

**A. BOSTON COACH**

Full Name (Last, First, Middle Initial)

Mailing Address 245 SUMMER ST.

City BOSTON State MA Zip Code 02111

Purpose of Disbursement  
TRAVEL: GROUND TRANSPORTATION

Candidate Name

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

State: District:

Date of Disbursement: 10 / 13 / 2021

FEC Identification Number: C

Transaction ID : SB21B.4181

Amount of Each Disbursement this Period: 249.36

Memo Item

**B. BOSTON COACH**

Full Name (Last, First, Middle Initial)

Mailing Address 245 SUMMER ST.

City BOSTON State MA Zip Code 02111

Purpose of Disbursement  
TRAVEL: GROUND TRANSPORTATION

Candidate Name

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

State: District:

Date of Disbursement: 10 / 25 / 2021

FEC Identification Number: C

Transaction ID : SB21B.4190

Amount of Each Disbursement this Period: 1445.79

Memo Item

**C. BOSTON COACH**

Full Name (Last, First, Middle Initial)

Mailing Address 245 SUMMER ST.

City BOSTON State MA Zip Code 02111

Purpose of Disbursement  
TRAVEL: GROUND TRANSPORTATION

Candidate Name

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

State: District:

Date of Disbursement: 12 / 03 / 2021

FEC Identification Number: C

Transaction ID : SB21B.4209

Amount of Each Disbursement this Period: 208.40

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1903.55

**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)  
**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

**A. BOSTON COACH**

Full Name (Last, First, Middle Initial)  
Mailing Address 245 SUMMER ST.

City BOSTON State MA Zip Code 02111

Purpose of Disbursement  
TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 03 / 2021

FEC Identification Number: C  
Transaction ID : SB21B.4210  
Amount of Each Disbursement this Period: 764.20

Memo Item

**B. BOSTON COACH**

Full Name (Last, First, Middle Initial)  
Mailing Address 245 SUMMER ST.

City BOSTON State MA Zip Code 02111

Purpose of Disbursement  
TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 27 / 2021

FEC Identification Number: C  
Transaction ID : SB21B.4211  
Amount of Each Disbursement this Period: 194.54

Memo Item

**C. BULLDOG COMPLIANCE**

Full Name (Last, First, Middle Initial)  
Mailing Address 138 CONANT ST  
STE 202

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 06 / 2021

FEC Identification Number: C  
Transaction ID : SB21B.4212  
Amount of Each Disbursement this Period: 10500.00

Memo Item

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

11458.74

**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)  
**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

Full Name (Last, First, Middle Initial) <b>A. BULLDOG COMPLIANCE</b>		Date of Disbursement MM / DD / YYYY 12 / 22 / 2021
Mailing Address 138 CONANT ST STE 202		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4213</b> Amount of Each Disbursement this Period [ ] 25.03
City BEVERLY	State MA	Zip Code 01915
Purpose of Disbursement COMPLIANCE CONSULTING EXPENSES: POSTAGE AND DELIVERY		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. DELTA AIRLINES</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2021
Mailing Address 1030 DELTA BLVD.		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4170</b> Amount of Each Disbursement this Period [ ] 637.40
City ATLANTA	State GA	Zip Code 30354
Purpose of Disbursement TRAVEL: AIR		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. DELTA AIRLINES</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2021
Mailing Address 1030 DELTA BLVD.		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4171</b> Amount of Each Disbursement this Period [ ] 4.99
City ATLANTA	State GA	Zip Code 30354
Purpose of Disbursement TRAVEL: AIR		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).....▶	[ ] 667.42
<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)

**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

Full Name (Last, First, Middle Initial)

**A. DELTA AIRLINES**

Mailing Address 1030 DELTA BLVD.

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
TRAVEL: AIR

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
10			05			2021			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4172

Amount of Each Disbursement this Period

[REDACTED] 4.99

Memo Item

Full Name (Last, First, Middle Initial)

**B. DELTA AIRLINES**

Mailing Address 1030 DELTA BLVD.

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
TRAVEL: AIR

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
12			01			2021			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4219

Amount of Each Disbursement this Period

[REDACTED] 54.99

Memo Item

Full Name (Last, First, Middle Initial)

**C. DESIGNER'S MANAGEMENT AGENCY**

Mailing Address 68 WHITE ST  
3RD FLR

City  
NEW YORK

State  
NY

Zip Code  
10013

Purpose of Disbursement  
EVENT PLANNING AND CONSULTING

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
12			02			2021			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4221

Amount of Each Disbursement this Period

[REDACTED] 125000.00

Memo Item

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

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

[REDACTED] 125059.98

[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)

**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

Full Name (Last, First, Middle Initial)

**A. DESIGNER'S MANAGEMENT AGENCY**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			03			2021			

Mailing Address 68 WHITE ST  
3RD FLR

City  
NEW YORK

State  
NY

Zip Code  
10013

Purpose of Disbursement  
EVENT PLANNING AND CONSULTING

C
---

FEC Identification Number

C
---

**Transaction ID : SB21B.4222**

Amount of Each Disbursement this Period

30000.00
----------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**B. ELECTIONS, LLC**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2021			

Mailing Address 1050 CONNECTICUT AVE, NW  
STE 500

City  
WASHINGTON

State  
DC

Zip Code  
20036

Purpose of Disbursement  
LEGAL CONSULTING

C
---

FEC Identification Number

C
---

**Transaction ID : SB21B.4207**

Amount of Each Disbursement this Period

15000.00
----------

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**C. ELECTIONS, LLC**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			20			2021			

Mailing Address 1050 CONNECTICUT AVE, NW  
STE 500

City  
WASHINGTON

State  
DC

Zip Code  
20036

Purpose of Disbursement  
LEGAL CONSULTING

C
---

FEC Identification Number

C
---

**Transaction ID : SB21B.4223**

Amount of Each Disbursement this Period

15000.00
----------

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

Memo Item

State: District:

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

60000.00
----------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

Full Name (Last, First, Middle Initial)

**A. FABRIZIO, LEE & ASSOCIATES, LLC**

Mailing Address 2624 NE 15TH ST

City  
FT LAUDERDALE

State  
FL

Zip Code  
33304

Purpose of Disbursement  
POLLING EXPENSE

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
12			27			2021			

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.4225**

Amount of Each Disbursement this Period

[REDACTED] 113000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 2903 SPRANKEL AVE

City  
MEMPHIS

State  
TN

Zip Code  
38118

Purpose of Disbursement  
DELIVERY EXPENSE

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
11			11			2021			

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.4203**

Amount of Each Disbursement this Period

[REDACTED] 330.85

Memo Item

Full Name (Last, First, Middle Initial)

**C. FEDEX**

Mailing Address 2903 SPRANKEL AVE

City  
MEMPHIS

State  
TN

Zip Code  
38118

Purpose of Disbursement  
DELIVERY EXPENSE

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
12			06			2021			

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.4226**

Amount of Each Disbursement this Period

[REDACTED] 39.60

Memo Item

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

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

[REDACTED] 113370.45

[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)  
**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

Full Name (Last, First, Middle Initial)

**A. FEDEX**

Mailing Address 2903 SPRANKEL AVE

City MEMPHIS State TN Zip Code 38118

Purpose of Disbursement DELIVERY EXPENSE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
12 / 16 / 2021

FEC Identification Number

C  
**Transaction ID : SB21B.4227**  
 Amount of Each Disbursement this Period  
 2960.96

Memo Item

Full Name (Last, First, Middle Initial)

**B. FINEST TRANSPORTATION**

Mailing Address 22252 ENSENADA WAY

City BOCA RATON State FL Zip Code 33433

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
10 / 12 / 2021

FEC Identification Number

C  
**Transaction ID : SB21B.4175**  
 Amount of Each Disbursement this Period  
 265.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. GRENELL, RICHARD, , ,**

Mailing Address C/O BULLDOG COMPLIANCE  
138 CONANT STREET 2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement MAGA POLICIES, INC. COST SHARE AGREEMENT: SALARY  
 (SB21B 42301)  
 Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
12 / 28 / 2021

FEC Identification Number

C  
**Transaction ID : SB21B.4257**  
 Amount of Each Disbursement this Period  
 7709.03

Memo Item

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

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

3225.96

**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)

**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

Full Name (Last, First, Middle Initial)

**A. HILTON WEST PALM BEACH**

Mailing Address 600 OKEECHOBEE BLVD.

City  
WEST PALM BEACH

State  
FL

Zip Code  
33401

Purpose of Disbursement  
TRAVEL: LODGING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			14			2021			

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.4186**  
Amount of Each Disbursement this Period  
[ ] 220.42

Memo Item

Full Name (Last, First, Middle Initial)

**B. JETBLUE**

Mailing Address 2701 QUEENS PLAZA N

City  
LONG ISLAND CITY

State  
NY

Zip Code  
11101

Purpose of Disbursement  
TRAVEL: AIR

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			13			2021			

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.4183**  
Amount of Each Disbursement this Period  
[ ] 485.79

Memo Item

Full Name (Last, First, Middle Initial)

**C. KGT GLOBAL CONSULTING LLC**

Mailing Address 2475 MERCER AVENUE SUITE 103

City  
WEST PALM BEACH

State  
FL

Zip Code  
33401

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2021			

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.4229**  
Amount of Each Disbursement this Period  
[ ] 60000.00

Memo Item

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

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

60706.21
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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)

**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

Full Name (Last, First, Middle Initial)

**A. KOFOED, CASSIDY, , ,**

Mailing Address C/O BULLDOG COMPLIANCE  
138 CONANT STREET 2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement  
MAGA POLICIES, INC. COST SHARE AGREEMENT: SALARY  
[SB21B.4197]  
Candidate Name

Category/  
Type

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2021			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4252

Amount of Each Disbursement this Period

[REDACTED] 5778.52

Memo Item

Full Name (Last, First, Middle Initial)

**B. KOFOED, CASSIDY, , ,**

Mailing Address C/O BULLDOG COMPLIANCE  
138 CONANT STREET 2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement  
MAGA POLICIES, INC. COST SHARE AGREEMENT: SALARY  
[SB21B.4230]  
Candidate Name

Category/  
Type

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			28			2021			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4258

Amount of Each Disbursement this Period

[REDACTED] 5087.98

Memo Item

Full Name (Last, First, Middle Initial)

**C. MAKE AMERICA GREAT AGAIN POLICIES INC.**

Mailing Address C/O BULLDOG COMPLIANCE  
138 CONANT ST. 2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement  
MAGA, AGAIN! COST SHARE AGREEMENT: SALARIES  
Candidate Name

Category/  
Type

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2021			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4197

Amount of Each Disbursement this Period

[REDACTED] 26393.65

Memo Item

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

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

[REDACTED] 26393.65

[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)

**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

Full Name (Last, First, Middle Initial)

**A. MAKE AMERICA GREAT AGAIN POLICIES INC.**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			28			2021			

Mailing Address C/O BULLDOGCOMPLIANCE  
138 CONANT ST. 2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement  
MAGA, AGAIN! COST SHARE AGREEMENT: SALARIES

Category/Type

FEC Identification Number

C

Transaction ID : SB21B.4230

Amount of Each Disbursement this Period

28228.46

Memo Item

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. MAR-A-LAGO CLUB**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			06			2021			

Mailing Address 1100 S. OCEAN BLVD.

City PALM BEACH State FL Zip Code 33480

Purpose of Disbursement  
EVENT EXPENSE: TRAVEL: LODGING

Category/Type

FEC Identification Number

C

Transaction ID : SB21B.4232

Amount of Each Disbursement this Period

1438.40

Memo Item

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. MICHAEL HOPKINS PHOTOGRAPHY**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			10			2021			

Mailing Address 783 SW 119TH WAY

City DAVIE State FL Zip Code 33325

Purpose of Disbursement  
EVENT EXPENSE: PHOTOGRAPHY

Category/Type

FEC Identification Number

C

Transaction ID : SB21B.4234

Amount of Each Disbursement this Period

1337.50

Memo Item

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

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

31004.36

**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)

**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

Full Name (Last, First, Middle Initial)

**A. MICHAEL HOPKINS PHOTOGRAPHY**

Mailing Address 783 SW 119TH WAY

City  
DAVIE

State  
FL

Zip Code  
33325

Purpose of Disbursement  
EVENT EXPENSE: PHOTOGRAPHY

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 20 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4235

Amount of Each Disbursement this Period

[REDACTED] 1337.50

Memo Item

Full Name (Last, First, Middle Initial)

**B. THE POST OAK HOTEL**

Mailing Address 1600 W LOOP S

City  
HOUSTON

State  
TX

Zip Code  
77027

Purpose of Disbursement  
TRAVEL: LODGING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 18 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4237

Amount of Each Disbursement this Period

[REDACTED] 2000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. TRUMP INTERNATIONAL GOLF CLUB, LC**

Mailing Address 3505 SUMMIT BLVD

City  
WEST PALM BEACH

State  
FL

Zip Code  
33406

Purpose of Disbursement  
EVENT EXPENSE: FACILITY RENTAL AND CATERING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 22 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4239

Amount of Each Disbursement this Period

[REDACTED] 10105.09

Memo Item

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

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

[REDACTED] 13442.59

[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)

**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

Full Name (Last, First, Middle Initial)

**A. TRUMP NATIONAL TRANSPORTATION SERVICE**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2021			

Mailing Address THE MAR-A-LAGO CLUB ATTN BRIAN BUT  
1100 S. OCEAN BLVD

City PALM BEACH State FL Zip Code 33480

Purpose of Disbursement  
EVENT EXPENSE: GROUND TRANSPORTATION

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4194

Amount of Each Disbursement this Period

[REDACTED] 378.00

Memo Item

Candidate Name

Category/  
Type

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

Full Name (Last, First, Middle Initial)

**B. TRUMP NATIONAL TRANSPORTATION SERVICE**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			20			2021			

Mailing Address THE MAR-A-LAGO CLUB ATTN BRIAN BUT  
1100 S. OCEAN BLVD

City PALM BEACH State FL Zip Code 33480

Purpose of Disbursement  
EVENT EXPENSE: GROUND TRANSPORTATION

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4241

Amount of Each Disbursement this Period

[REDACTED] 540.00

Memo Item

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

Full Name (Last, First, Middle Initial)

**C. UNITED AIRLINES**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			15			2021			

Mailing Address 233 SOUTH WACKER DR.

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
TRAVEL: AIR

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4245

Amount of Each Disbursement this Period

[REDACTED] 785.80

Memo Item

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

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

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

[REDACTED] 1703.80

[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)  
**MAKE AMERICA GREAT AGAIN, AGAIN! INC.**

**A. UNITED AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 233 SOUTH WACKER DR.

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 15 / 2021

FEC Identification Number: C

Transaction ID : SB21B.4246

Amount of Each Disbursement this Period: 1158.80

Memo Item

**B. WHITAKER, MATTHEW, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address C/O BULLDOG COMPLIANCE  
138 CONANT STREET 2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement MAGA POLICIES, INC. COST SHARE AGREEMENT: SALARY  
(SB21B.4230)

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 28 / 2021

FEC Identification Number: C

Transaction ID : SB21B.4255

Amount of Each Disbursement this Period: 7880.71

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1158.80
<b>TOTAL</b> This Period (last page this line number only).....▶	475739.41