

**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 INC.

ADDRESS (number and street)

C/O BULLDOG COMPLIANCE

138 CONANT STREET STE 401

Check if different
than previously
reported. (ACC)

BEVERLY

MA

01915

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00825851

3. IS THIS
REPORTNEW
(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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
02 01 2024

through

M M M / D D D / Y Y Y Y Y Y
02 29 2024

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, , ,

Date

M M M / D D D / Y Y Y Y Y Y
03 20 2024

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

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

MAKE AMERICA GREAT AGAIN INC.Report Covering the Period: From:

M M	/	D D	/	Y Y Y Y Y
02		01		2024

 To:

M M	/	D D	/	Y Y Y Y Y
02		29		2024

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2024		23253358.94
(b) Cash on Hand at Beginning of Reporting Period.....	19721303.36	
(c) Total Receipts (from Line 19)	12766966.77	20116966.77
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	32488270.13	43370325.71
7. Total Disbursements (from Line 31).....	6981922.85	17863978.43
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	25506347.28	25506347.28
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

MAKE AMERICA GREAT AGAIN INC.

Report Covering the Period:

From:

M M / D D / Y Y Y Y
02 01 2024

To:

M M / D D / Y Y Y Y
02 29 2024

I. Receipts

COLUMN A
Total This PeriodCOLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

12714000.00

20064000.00

(ii) Unitemized

50.00

50.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

12714050.00

20064050.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

28274.89

28274.89

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

12742324.89

20092324.89

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).....

24641.88

24641.88

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))

12766966.77

20116966.77

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

12766966.77

20116966.77

DETAILED SUMMARY PAGE of Disbursements

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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	436590.20	1195410.71
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	436590.20	1195410.71
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)	1545332.65	6668567.72
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).....	5000000.00	10000000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	5000000.00	10000000.00
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)) ..	6981922.85	17863978.43
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6981922.85	17863978.43

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	12742324.89	20092324.89
34. Total Contribution Refunds (from Line 28(d))	5000000.00	10000000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7742324.89	10092324.89
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	436590.20	1195410.71
37. Offsets to Operating Expenditures (from Line 15, page 3).....	24641.88	24641.88
38. Net Operating Expenditures (subtract Line 37 from Line 36)	411948.32	1170768.83

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 59
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

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

A. ADAMS, DAN, , ,

Mailing Address 84 VILLA RD.

City
GREENVILLEState
SCZip Code
29615FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE CAPITAL CORPOccupation (for Individual)
PARTNER

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
02 / 26 / 2024

Transaction ID : SA11AI.6768

Amount of Each Receipt this Period

100000.00

☐ Memo Item

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

B. BEAMAN, LEE, , ,

Mailing Address 1525 BROADWAY

City
NASHVILLEState
TNZip Code
37203FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BEAMAN VENTURESOccupation (for Individual)
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

95000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 09 / 2024

Transaction ID : SA11AI.6726

Amount of Each Receipt this Period

95000.00

☐ Memo Item

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

C. BECK, AMANDA, HOST, ,

Mailing Address 31 NORTHUMBERLAND

City
NASHVILLEState
TNZip Code
37215FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
PR CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

38400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 21 / 2024

Transaction ID : SA11AI.6764

Amount of Each Receipt this Period

38400.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

233400.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 59
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

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

A. BECK, THOMAS, M, ,

Mailing Address 31 NORTHUMBERLAND

City
NASHVILLEState
TNZip Code
37215FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HCA HEALTHCAREOccupation (for Individual)
HEALTHCARE EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

38400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 21 / 2024

Transaction ID : SA11AI.6731

Amount of Each Receipt this Period

38400.00

☐ Memo Item

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

B. BENOIT, SUZANNE, , ,

Mailing Address 215 W CHEROKEE AVE

City
CARTERSVILLEState
GAZip Code
30120FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

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
02 / 21 / 2024

Transaction ID : SA11AI.6751

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

C. BESSANT, SCOTT, , ,

Mailing Address 100 CHURCH ST.

City
CHARLESTONState
SCZip Code
29401FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KEY SQUARE GROUPOccupation (for Individual)
INVESTMENT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 01 / 2024

Transaction ID : SA11AI.6744

Amount of Each Receipt this Period

500000.00

☐ Memo Item

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

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

540400.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 59
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

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

A. BIGELOW, ROBERT, T, ,

Mailing Address 1899 W BROOKS AVE

City
NORTH LAS VEGASState
NVZip Code
89032FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
AEROSPACE & REAL ESTATE DEVEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 09 / 2024

Transaction ID : SA11AI.6755

Amount of Each Receipt this Period

5000000.00

☐ Memo Item

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

B. CASTELLANI, ROBERT, , ,

Mailing Address PO BOX 27329

City
GREENSVILLEState
SCZip Code
29616FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NORTH AMERICAN RESCUEOccupation (for Individual)
CEO

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
02 / 29 / 2024

Transaction ID : SA11AI.6741

Amount of Each Receipt this Period

100000.00

☐ Memo Item

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

C. CHEVES, WALLACE, BEAUFORT, ,

Mailing Address 100 CHAPMAN PLACE

City
GREENVILLEState
SCZip Code
29605FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
GAMING/REAL ESTATE DEVELOPME

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
02 / 16 / 2024

Transaction ID : SA11AI.6759

Amount of Each Receipt this Period

100000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

5200000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 59
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

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

A. CHURCHILL BUSINESS CONSULTANTS INC.

Mailing Address 27 W LEMON H

City
LANCASTERState
PAZip Code
17607FEC 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 ▼

250000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2024

Transaction ID : SA11AI.6716

Amount of Each Receipt this Period

250000.00

☐ Memo Item

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

B. CREI HOLDINGS LLC

Mailing Address 2290 NW 110 AVE

City
MIAMIState
FLZip Code
33172FEC 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 ▼

77000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 22 / 2024

Transaction ID : SA11AI.6775

Amount of Each Receipt this Period

77000.00

☐ Memo Item

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

C. CROELL INCMailing Address 2010 KENWOOD AVE
PO BOX 430City
NEW HAMPTONState
IAZip Code
50659FEC 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 ▼

27000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 09 / 2024

Transaction ID : SA11AI.6713

Amount of Each Receipt this Period

27000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

354000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 10 OF 59
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

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

A. FAIR, ALAN, , ,Mailing Address 1225 17TH ST
STE 140City
DENVERState
COZip Code
80202FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 14 / 2024

Transaction ID : SA11AI.6737

Amount of Each Receipt this Period

1000000.00

☐ Memo Item

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

B. FOX, SAUL, , ,

Mailing Address 2105 WOODSIDE RD STE D

City

WOODSIDE

State
CAZip Code
94062FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
INVESTMENT MANAGER

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
02 / 01 / 2024

Transaction ID : SA11AI.6756

Amount of Each Receipt this Period

50000.00

☐ Memo Item

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

C. GEO ACQUISITION II INC

Mailing Address 4955 TECHNOLOGY WAY

City

BOCA RATON

State
FLZip Code
33431FEC 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
02 / 09 / 2024

Transaction ID : SA11AI.6715

Amount of Each Receipt this Period

500000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1550000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER: PAGE 11 OF 59
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

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

A. GEORGIA TRAILER RENTAL

Mailing Address 255 N ERWIN ST

City
CARTERSVILLEState
GAZip Code
30120FEC 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 ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 21 / 2024

Transaction ID : SA11AI.6772

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

B. GERSON, EL, , ,

Mailing Address PO BOX 10696

City
CHICAGOState
ILZip Code
60611FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
REAL ESTATE

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
02 / 21 / 2024

Transaction ID : SA11AI.6762

Amount of Each Receipt this Period

50000.00

☐ Memo Item

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

C. GRAHAM, SUZETTE, , ,

Mailing Address 90 VOLUNTEER DR.

City
HENDERSONVILLEState
TNZip Code
37075FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PATRIOT ANGELSOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

38400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 26 / 2024

Transaction ID : SA11AI.6746

Amount of Each Receipt this Period

38400.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

89400.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 59
(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 INC.

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

A. HERBSTER, CHARLES, W, ,

Mailing Address PO BOX 549

City
FALLS CITYState
NEZip Code
68355FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
FARMER

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
02 / 09 / 2024

Transaction ID : SA11AI.6757

Amount of Each Receipt this Period

10000.00

☐ Memo Item

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

B. JONES, JANIE, P, ,

Mailing Address P.O. BOX 1015

City
CLEVELANDState
TNZip Code
37364FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKEROccupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 29 / 2024

Transaction ID : SA11AI.6824

Amount of Each Receipt this Period

45000.00

☒ Memo ItemPARTNERSHIP ATTRIBUTION: JONES
CAPITALCORP LLC [SA11AI:6773]

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

C. JONES, W., ALLAN, , JR

Mailing Address P.O. BOX 1015

City
CLEVELANDState
TNZip Code
37364FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

45000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 29 / 2024

Transaction ID : SA11AI.6823

Amount of Each Receipt this Period

45000.00

☒ Memo ItemPARTNERSHIP ATTRIBUTION: JONES
CAPITALCORP LLC [SA11AI:6773]

SUBTOTAL of Receipts This Page (optional)..... ►

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

10000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 13 OF 59
(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 INC.

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

A. JONES CAPITALCORP LLC

Mailing Address P.O. BOX 1015

City
CLEVELANDState
TNZip Code
37364FEC 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 ▼

90000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 29 / 2024

Transaction ID : SA11AI.6773

Amount of Each Receipt this Period

90000.00

☐ Memo ItemSEE PARTNERSHIP ATTRIBUTIONS
[SA11AI.6823;SA11AI.6824]

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

B. LAMELAS, PETER, , ,

Mailing Address 65 SPOONBILL RD.

City
MANALAPANState
FLZip Code
33462FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
02 / 13 / 2024

Transaction ID : SA11AI.6749

Amount of Each Receipt this Period

100000.00

☐ Memo Item

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

C. LIAUTAUD, JAMES, J, ,Mailing Address 24 DOCKSIDE LN
PMB 108City
KEY LARGOState
FLZip Code
33037FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 05 / 2024

Transaction ID : SA11AI.6747

Amount of Each Receipt this Period

1000000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1190000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 14 OF 59
(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 INC.

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

A. LOEFFLER, KELLY, , ,

Mailing Address 3650 TUXEDO RD NW

City
ATLANTAState
GAZip Code
30305FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GREATER GEORGIAOccupation (for Individual)
CHAIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 09 / 2024

Transaction ID : SA11AI.6728

Amount of Each Receipt this Period

220000.00

☐ Memo Item

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

B. LOEFFLER, KELLY, , ,

Mailing Address 3650 TUXEDO RD NW

City
ATLANTAState
GAZip Code
30305FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GREATER GEORGIAOccupation (for Individual)
CHAIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 27 / 2024

Transaction ID : SA11AI.6729

Amount of Each Receipt this Period

500000.00

☐ Memo Item

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

C. M8 ENTERPRISES LLC

Mailing Address 1511 W 27TH ST

City
MIAMI BEACHState
FLZip Code
33140FEC 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 ▼

1000000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2024

Transaction ID : SA11AI.6825

Amount of Each Receipt this Period

1000000.00

☐ Memo ItemSEE SOLE PROPRIETOR ATTRIBUTION
[SA11AI.6827]

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

1720000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 15 OF 59
(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 INC.

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

A. MICHAEL, EMIL, , ,

Mailing Address 1511 W 27TH ST

City
MIAMI BEACHState
FLZip Code
33140FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
M8 ENTERPRISES LLCOccupation (for Individual)
CONSULTING

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
02 / 28 / 2024

Transaction ID : SA11AI.6827

Amount of Each Receipt this Period

1000000.00

☒ Memo ItemSOLE PROPRIETOR ATTRIBUTION: M8
ENTERPRISES LLC [SA11AI:6825]

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

B. MOSBACHER, GEORGETTE, , ,

Mailing Address 3368 CAYMAN LN

City
NAPLESState
FLZip Code
34119FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

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
02 / 08 / 2024

Transaction ID : SA11AI.6735

Amount of Each Receipt this Period

100000.00

☐ Memo Item

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

C. NEGREA, DAN, , ,

Mailing Address 3 NORTH ST

City
GREENWICHState
CTZip Code
06830FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ATLANTIC COUNCILOccupation (for Individual)
SENIOR DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

75000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 09 / 2024

Transaction ID : SA11AI.6725

Amount of Each Receipt this Period

75000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

175000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 16 OF 59
(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 INC.

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

A. OLD NATIONAL BANCORP

Mailing Address PO BOX 718

City
EVANSVILLEState
INZip Code
47705FEC 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 ▼

20000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 21 / 2024

Transaction ID : SA11AI.6779

Amount of Each Receipt this Period

20000.00

☐ Memo Item

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

B. ORR, EDITH, , ,

Mailing Address 1001 BELLE MEADE BLVD

City
NASHVILLEState
TNZip Code
37205FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKEROccupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

90000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 29 / 2024

Transaction ID : SA11AI.6743

Amount of Each Receipt this Period

90000.00

☐ Memo Item

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

C. OUTBUILD LLC

Mailing Address 1429 N VENETIAN WAY

City
MIAMI BEACHState
FLZip Code
33139FEC 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
02 / 07 / 2024

Transaction ID : SA11AI.6770

Amount of Each Receipt this Period

100000.00

☐ Memo Item

TAXED AS A CORPORATION

SUBTOTAL of Receipts This Page (optional)..... ►

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

210000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 17 OF 59
(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 INC.

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

A. RAIFORD, J, WAYNE, ,

Mailing Address 804 SWEETWATER RD

City
NORTH AUGUSTAState
SCZip Code
29860FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

90000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 21 / 2024

Transaction ID : SA11AI.6761

Amount of Each Receipt this Period

90000.00

☐ Memo Item

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

B. RAI SERVICES COMPANY

Mailing Address 401 N MAIN ST

City
WINSTON-SALEMState
NCZip Code
27101FEC 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 ▼

1000000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 29 / 2024

Transaction ID : SA11AI.6718

Amount of Each Receipt this Period

1000000.00

☐ Memo Item

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

C. REDDY, RENEE, , ,

Mailing Address 118 OCEAN BLVD

City
ISLE OF PALMSState
SCZip Code
29451FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKEROccupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

37500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 21 / 2024

Transaction ID : SA11AI.6733

Amount of Each Receipt this Period

37500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1127500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 18 OF 59
(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 INC.

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

A. REDDY, ROM, L, ,

Mailing Address 118 OCEAN BLVD

City
ISLE OF PALMSState
SCZip Code
29451FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SPRINTURFOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

37500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 21 / 2024

Transaction ID : SA11AI.6766

Amount of Each Receipt this Period

37500.00

☐ Memo Item

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

B. ROSS, NANCY, ROURKE, ,

Mailing Address 3642 SAVANNAH HWY

City
JOHNS ISLANDState
SCZip Code
29455FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
02 / 28 / 2024

Transaction ID : SA11AI.6739

Amount of Each Receipt this Period

250000.00

☐ Memo Item

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

C. SUNDQUIST, DIANE, , ,

Mailing Address PO BOX 14790

City
MILL CREEKState
WAZip Code
98082FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKEROccupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

13400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 09 / 2024

Transaction ID : SA11AI.6723

Amount of Each Receipt this Period

13400.00

☐ Memo Item

REATTRIBUTION FROM SPOUSE

SUBTOTAL of Receipts This Page (optional)..... ►

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

300900.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 19 OF 59
(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 INC.

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

A. SUNDQUIST, LARRY, , ,

Mailing Address PO BOX 14790

City
MILL CREEKState
WAZip Code
98082FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ADAMANT HOMESOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

26800.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 09 / 2024

Transaction ID : SA11AI.6720

Amount of Each Receipt this Period

26800.00

☐ Memo Item

SEE REATTRIBUTION

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

B. SUNDQUIST, LARRY, , ,

Mailing Address PO BOX 14790

City
MILL CREEKState
WAZip Code
98082FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ADAMANT HOMESOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

13400.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 09 / 2024

Transaction ID : SA11AI.6721

Amount of Each Receipt this Period

- 13400.00

☐ Memo Item

REATTRIBUTION TO SPOUSE

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

C.

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

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

13400.00

12714000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 20 OF 59
(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 INC.

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

A. DUTY, HONOR, COURAGE

Mailing Address PO BOX 183

City
HUDSONState
WIZip Code
54016FEC ID number of contributing
federal political committee.**C** C00842146

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 29 / 2024

Transaction ID : SA11C.6707

Amount of Each Receipt this Period

25000.00

☐ Memo Item

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

B. THE POLICYHOLDER PROTECTION GROUP

Mailing Address 1103 HAYS ST

City
TALLAHASSEEState
FLZip Code
32301FEC 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 ▼

3274.89

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 09 / 2024

Transaction ID : SA11C.6777

Amount of Each Receipt this Period

3274.89

☐ Memo Item

FLORIDA STATE COMMITTEE

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

C.

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

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

28274.89

28274.89

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 21 OF 59
(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 INC.

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

A. ELECTORAL COMMUNICATIONS GROUP LLCMailing Address 701 S HOWARD AVE
STE 106-848City
TAMPAState
FLZip Code
33606FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA15.6708

Amount of Each Receipt this Period

☐ Memo Item

VENDOR REFUND: TEXT MESSAGES

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

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

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

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

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

SUBTOTAL of Receipts This Page (optional)..... ►

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

Full Name (Last, First, Middle Initial)

A. 305SUNNSHINE STRATEGIESMailing Address 7901 4TH ST N
STE 300City
ST PETERSBURGState
FLZip Code
33702Purpose of Disbursement
RESEARCH CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	7			2	0	2	4	

FEC Identification Number

C
Transaction ID : SB21B.6652

Amount of Each Disbursement this Period

 13200.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. 801 CHOPHOUSE

Mailing Address 801 GRAND AVE STE 200

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
CREDIT CARD PMT [SB21B.6654]: EVENT EXPENSE: FACILITY RENTAL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	5			2	0	2	4	

FEC Identification Number

C
Transaction ID : SB21B.6819

Amount of Each Disbursement this Period

 3625.53☒ Memo Item

Full Name (Last, First, Middle Initial)

C. ACI FLORIDA POWER & LIGHT

Mailing Address 700 UNIVERSE BLVD

City
NORTH PALM BEACHState
FLZip Code
33408Purpose of Disbursement
CREDIT CARD PMT [SB21B.6654]: UTILITIES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2			2	3			2	0	2	3	

FEC Identification Number

C
Transaction ID : SB21B.6807

Amount of Each Disbursement this Period

 315.40☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 13200.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

Full Name (Last, First, Middle Initial)

A. AL FRESCO RESTAURANT

Mailing Address 2345 SOUTH OCEAN BLVD

City
PALM BEACHState
FLZip Code
33480

Purpose of Disbursement

CREDIT CARD PMT [SB21B.6654]: TRAVEL: MEALS

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	7							2024

FEC Identification Number

C

Transaction ID : SB21B.6798

Amount of Each Disbursement this Period

70.64

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. ALLIANZ TRAVEL INS

Mailing Address 9950 MAYLAND DR

City
RICHMONDState
VAZip Code
23233

Purpose of Disbursement

CREDIT CARD PMT [SB21B.6654]: TRAVEL: INSURANCE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	2							2024

FEC Identification Number

C

Transaction ID : SB21B.6792

Amount of Each Disbursement this Period

33.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 1 SKYVIEW DR

City
FORT WORTHState
TXZip Code
76155

Purpose of Disbursement

CREDIT CARD PMT [SB21B.6654]: TRAVEL: AIR

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	0							2024

FEC Identification Number

C

Transaction ID : SB21B.6809

Amount of Each Disbursement this Period

475.59

☒ Memo Item

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 1 SKYVIEW DR

City
FORT WORTHState
TXZip Code
76155

Purpose of Disbursement

CREDIT CARD PMT [SB21B.6654]: CREDIT: TRAVEL: AIR

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	1			1	3			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.6780

Amount of Each Disbursement this Period

- 292.49

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 1 SKYVIEW DR

City
FORT WORTHState
TXZip Code
76155

Purpose of Disbursement

CREDIT CARD PMT [SB21B.6654]: TRAVEL: AIR

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	1			2	0			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.6803

Amount of Each Disbursement this Period

173.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City
NEWARKState
NJZip Code
07101

Purpose of Disbursement

CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

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	2			0	7			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.6654

Amount of Each Disbursement this Period

31798.18

☐ Memo Item

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

31798.18

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

☒	21b	☐	22	☐	23	☐	26	☐	27
☐	28a	☐	28b	☐	28c	☐	29	☐	30b

MAKE AMERICA GREAT AGAIN INC.



1400.00

 Memo Item

MM / DD / YYYY

5536.60

Memo Item



88.98

✕ Memo Item

6936.60

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

Full Name (Last, First, Middle Initial)

A. BLOOMBERG.COM

Mailing Address 731 LEXINGTON AVE

City
NEW YORKState
NYZip Code
10022

Purpose of Disbursement

CREDIT CARD PMT [SB21B.6654]: SOFTWARE SUBSCRIPTION

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
1	2			2	6			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.6782

Amount of Each Disbursement this Period

0.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. BOYLE, DANIEL, , ,

Mailing Address 3229 HESTER DR

City
TALLAHASSEEState
FLZip Code
32309

Purpose of Disbursement

RESEARCH CONSULTING

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	2			2	9			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.6675

Amount of Each Disbursement this Period

11000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BUDGET RENT A CAR

Mailing Address 300 CTR POINTE DR

City
VIRGINIA BEACHState
VAZip Code
23462

Purpose of Disbursement

CREDIT CARD PMT [SB21B.6654]: TRAVEL: GROUND

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	1			1	6			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.6805

Amount of Each Disbursement this Period

221.30

☒ Memo Item

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

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

11000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

Full Name (Last, First, Middle Initial)

A. BUDOWICH, TAYLOR, , ,Mailing Address 516 S. DIXIE HWY
PMB 196City
WEST PALM BEACHState
FLZip Code
33401

Purpose of Disbursement

PAYROLL [SB21B.6693]: EXECUTIVE DIRECTOR

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	4	

FEC Identification Number

C **Transaction ID : SB21B.6705**

Amount of Each Disbursement this Period

 7044.73☒ Memo Item

Full Name (Last, First, Middle Initial)

B. BUDOWICH, TAYLOR, , ,Mailing Address 516 S. DIXIE HWY
PMB 196City
WEST PALM BEACHState
FLZip Code
33401

Purpose of Disbursement

PAYROLL [SB21B.6697]: EXECUTIVE DIRECTOR

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	4	

FEC Identification Number

C **Transaction ID : SB21B.6706**

Amount of Each Disbursement this Period

 7044.73☒ Memo Item

Full Name (Last, First, Middle Initial)

C. BULLDOG COMPLIANCEMailing Address 138 CONANT ST
STE 401City
BEVERLYState
MAZip Code
01915

Purpose of Disbursement

COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	5			2	0	2	4	

FEC Identification Number

C **Transaction ID : SB21B.6656**

Amount of Each Disbursement this Period

 10000.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 10000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

Full Name (Last, First, Middle Initial)

A. BULLDOG COMPLIANCEMailing Address 138 CONANT ST
STE 401City
BEVERLYState
MAZip Code
01915Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	7			2	0	2	4	

FEC Identification Number

C Transaction ID : SB21B.6657

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. C'EST SI BON CATERING

Mailing Address 1128 NORTH FEDERAL HIGHWAY

City
LAKE PARKState
FLZip Code
33403Purpose of Disbursement
EVENT EXPENSE: CATERING SERVICES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	7			2	0	2	4	

FEC Identification Number

C Transaction ID : SB21B.6660

Amount of Each Disbursement this Period

7267.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. C'EST SI BON CATERING

Mailing Address 1128 NORTH FEDERAL HIGHWAY

City
LAKE PARKState
FLZip Code
33403Purpose of Disbursement
REIMBURSEMENT [SB21B.6689]: EVENT EXPENSE: CATERING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	5			2	0	2	4	

FEC Identification Number

C Transaction ID : SB21B.6822

Amount of Each Disbursement this Period

5260.39

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1	7	2	6	7	.	2	2					

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

Full Name (Last, First, Middle Initial)

A. CAMPAIGN NUCLEUS LLCMailing Address 3593 MEDINA RD
#110City
MEDINAState
OHZip Code
44256Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 01 / 2024

FEC Identification Number

C Transaction ID : SB21B.6658

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CANVA

Mailing Address 2140 SOUTH DUPONT HWY

City
CAMDENState
DEZip Code
19934Purpose of Disbursement
CREDIT CARD PMT [SB21B.6654]: SOFTWARE SUBSCRIPTION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 18 / 2024

FEC Identification Number

C Transaction ID : SB21B.6790

Amount of Each Disbursement this Period

12.95

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. CANVAS CHAMP

Mailing Address 752 WINER INDUSTRIAL WAY

City
LAWRENCEVILLEState
GAZip Code
30046Purpose of Disbursement
CREDIT CARD PMT [SB21B.6654]: PRINTING EXPENSE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 05 / 2024

FEC Identification Number

C Transaction ID : SB21B.6797

Amount of Each Disbursement this Period

64.77

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

5000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

Full Name (Last, First, Middle Initial)

A. CANVAS CHAMP

Mailing Address 752 WINER INDUSTRIAL WAY

City
LAWRENCEVILLEState
GAZip Code
30046

Purpose of Disbursement

CREDIT CARD PMT [SB21B.6654]: PRINTING EXPENSE

Candidate Name

Category/
Type

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	1			1	7			2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6808

Amount of Each Disbursement this Period

[REDACTED] 408.97

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. CHAIN BRIDGE BANK N.A.

Mailing Address 1445-A LAUGHLIN AVE.

City
MCLEANState
VAZip Code
22101

Purpose of Disbursement

BANK FEE

Candidate Name

Category/
Type

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	2			0	1			2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6661

Amount of Each Disbursement this Period

[REDACTED] 25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CHAIN BRIDGE BANK N.A.

Mailing Address 1445-A LAUGHLIN AVE.

City
MCLEANState
VAZip Code
22101

Purpose of Disbursement

BANK FEE

Candidate Name

Category/
Type

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	2			0	1			2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6662

Amount of Each Disbursement this Period

[REDACTED] 2.50

☐ Memo Item

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

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

[REDACTED] 27.50

[REDACTED]

☒	21b	☐	22	☐	23	☐	26	☐	27
☐	28a	☐	28b	☐	28c	☐	29	☐	30b

MAKE AMERICA GREAT AGAIN INC.

A diagram of a three-part card. The first part has a label 'M' above two input fields, with the value '02' entered in the first. The second part has a label 'D' above two input fields, with the value '02' entered in the first. The third part has a label 'Y' above four input fields, with the value '2024' entered across all four.

Category/
Type

25.00

Memo Item

District:

Category/
Type

25.00

Memo Item

District:

02 / 15 / 2024

Category/
Type

25.00

Memo Item

75.00

--	--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

Full Name (Last, First, Middle Initial)

A. CHAIN BRIDGE BANK N.A.

Mailing Address 1445-A LAUGHLIN AVE.

City
MCLEANState
VAZip Code
22101

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	5			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.6671

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CHAIN BRIDGE BANK N.A.

Mailing Address 1445-A LAUGHLIN AVE.

City
MCLEANState
VAZip Code
22101

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	6			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.6666

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CHAIN BRIDGE BANK N.A.

Mailing Address 1445-A LAUGHLIN AVE.

City
MCLEANState
VAZip Code
22101

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	6			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.6669

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

Full Name (Last, First, Middle Initial)

A. CHAIN BRIDGE BANK N.A.

Mailing Address 1445-A LAUGHLIN AVE.

City
MCLEANState
VAZip Code
22101

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	6			2	0	2	4	

FEC Identification Number

C

Transaction ID : SB21B.6670

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CHAIN BRIDGE BANK N.A.

Mailing Address 1445-A LAUGHLIN AVE.

City
MCLEANState
VAZip Code
22101

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	2	4	

FEC Identification Number

C

Transaction ID : SB21B.6668

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CHAIN BRIDGE BANK N.A.

Mailing Address 1445-A LAUGHLIN AVE.

City
MCLEANState
VAZip Code
22101

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	2	4	

FEC Identification Number

C

Transaction ID : SB21B.6672

Amount of Each Disbursement this Period

25.00

☐ Memo Item

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

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

75.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

Full Name (Last, First, Middle Initial)

A. CHAIN BRIDGE BANK N.A.

Mailing Address 1445-A LAUGHLIN AVE.

City
MCLEANState
VAZip Code
22101

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	3		2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.6673

Amount of Each Disbursement this Period

25.00											
-------	--	--	--	--	--	--	--	--	--	--	--

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CHAIN BRIDGE BANK N.A.

Mailing Address 1445-A LAUGHLIN AVE.

City
MCLEANState
VAZip Code
22101

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	6		2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.6667

Amount of Each Disbursement this Period

25.00											
-------	--	--	--	--	--	--	--	--	--	--	--

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CHAIN BRIDGE BANK N.A.

Mailing Address 1445-A LAUGHLIN AVE.

City
MCLEANState
VAZip Code
22101

Purpose of Disbursement

BANK FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	9		2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.6674

Amount of Each Disbursement this Period

25.00											
-------	--	--	--	--	--	--	--	--	--	--	--

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

75.00											
-------	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

Full Name (Last, First, Middle Initial)

A. DELAWARE DIVISION OF CORPORATIONS

Mailing Address PO BOX 898

City
DOVERState
DEZip Code
19903

Purpose of Disbursement

REGISTRATION FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.6679**

Amount of Each Disbursement this Period

225.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ELECTIONS LLCMailing Address 1050 CONNECTICUT AVE NW
STE 500City
WASHINGTONState
DCZip Code
20036

Purpose of Disbursement

LEGAL CONSULTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	5			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.6680**

Amount of Each Disbursement this Period

12500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELECTORAL COMMUNICATIONS GROUP LLCMailing Address 701 S HOWARD AVE
STE 106-848City
TAMPAState
FLZip Code
33606

Purpose of Disbursement

POLITICAL AND PUBLIC RELATIONS CONSULTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.6681**

Amount of Each Disbursement this Period

10000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

22725.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

Full Name (Last, First, Middle Initial)

A. FABRIZIO, LEE & ASSOCIATES, LLC

Mailing Address 2624 NE 15TH STREET

City
FT. LAUDERDALEState
FLZip 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	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : SB21B.6682

Amount of Each Disbursement this Period

43000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FABRIZIO, LEE & ASSOCIATES, LLC

Mailing Address 2624 NE 15TH STREET

City
FT. LAUDERDALEState
FLZip 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	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : SB21B.6683

Amount of Each Disbursement this Period

31000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FABRIZIO, LEE & ASSOCIATES, LLC

Mailing Address 2624 NE 15TH STREET

City
FT. LAUDERDALEState
FLZip 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	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : SB21B.6684

Amount of Each Disbursement this Period

49000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

123000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

Full Name (Last, First, Middle Initial)

A. FABRIZIO, LEE & ASSOCIATES, LLC

Mailing Address 2624 NE 15TH STREET

City
FT. LAUDERDALEState
FLZip 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	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : SB21B.6685

Amount of Each Disbursement this Period

64000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GO BIG MEDIAMailing Address 44 CANAL CENTER PLZ
STE 315City
ALEXANDRIAState
VAZip Code
22314

Purpose of Disbursement

DIGITAL CONSULTING EXPENSES: TRAVEL

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	2			2	0	2	4	

FEC Identification Number

C

Transaction ID : SB21B.6686

Amount of Each Disbursement this Period

218.53

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GO BIG MEDIAMailing Address 44 CANAL CENTER PLZ
STE 315City
ALEXANDRIAState
VAZip Code
22314

Purpose of Disbursement

DIGITAL CONSULTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	7			2	0	2	4	

FEC Identification Number

C

Transaction ID : SB21B.6687

Amount of Each Disbursement this Period

10000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

74218.53

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

Full Name (Last, First, Middle Initial)

A. GO BIG MEDIAMailing Address 44 CANAL CENTER PLZ
STE 315City
ALEXANDRIAState
VAZip Code
22314

Purpose of Disbursement

PRODUCTION COSTS: DIGITAL ADS (NON IE RELATED)

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	4

FEC Identification Number

C**Transaction ID : SB21B.6704**

Amount of Each Disbursement this Period

329.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GRABIEN

Mailing Address 1820 AVE, M 1163

City
BROOKLYNState
NYZip Code
11230

Purpose of Disbursement

CREDIT CARD PMT [SB21B.6654]: SUBSCRIPTION: TV MONITORING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y
0	1			1	3			2	0	2	4

FEC Identification Number

C**Transaction ID : SB21B.6815**

Amount of Each Disbursement this Period

1255.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. HOTEL FORT DES MOINES

Mailing Address 1000 WALNUT ST

City
DES MOINESState
IAZip Code
50309

Purpose of Disbursement

CREDIT CARD PMT [SB21B.6654]: TRAVEL: LODGING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y
0	1			1	7			2	0	2	4

FEC Identification Number

C**Transaction ID : SB21B.6821**

Amount of Each Disbursement this Period

21601.33

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

329.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

Full Name (Last, First, Middle Initial)

A. HUDSON NEWS

Mailing Address INTNL AIRPORT 5800 FLR DR

City
DES MOINESState
IAZip Code
50321

Purpose of Disbursement

CREDIT CARD PMT [SB21B.6654]: TRAVEL: MEALS

Candidate Name

Category/
Type

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	1			1	6			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.6788

Amount of Each Disbursement this Period

11.83

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. IN CONFIDENCE

Mailing Address 1000 WALNUT ST

City
DES MOINESState
IAZip Code
50309

Purpose of Disbursement

CREDIT CARD PMT [SB21B.6654]: EVENT EXPENSE: FACILITY RENTAL

Candidate Name

Category/
Type

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	1			1	6			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.6817

Amount of Each Disbursement this Period

1725.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. JULIUS AI

Mailing Address 149 NEW MONTGOMERY ST 4TH FLOOR

City
SAN FRANCISCOState
CAZip Code
94105

Purpose of Disbursement

CREDIT CARD PMT [SB21B.6654]: SUBSCRIPTION: DATA ANALYSIS

Candidate Name

Category/
Type

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	1			0	8			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B.6793

Amount of Each Disbursement this Period

37.99

☒ Memo Item

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

0.00

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

☒	21b	☐	22	☐	23	☐	26	☐	27
☐	28a	☐	28b	☐	28c	☐	29	☐	30b

MAKE AMERICA GREAT AGAIN INC.

FEC Schedule B (Form 3X) Rev. 05/2016

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

Full Name (Last, First, Middle Initial)

A. PAULSON, JOHN, , ,

Mailing Address 1840 S. OCEAN BLVD

City
PALM BEACHState
FLZip Code
33480

Purpose of Disbursement

REIMBURSEMENT: SEE MEMO ITEMS IF REQUIRED

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	5			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.6689**

Amount of Each Disbursement this Period

5260.39

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PAYCHEX OF NEW YORK LLCMailing Address 714 BROOK STREET
SUITE 120City
ROCKY HILLState
CTZip Code
06067

Purpose of Disbursement

PAYROLL

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.6693**

Amount of Each Disbursement this Period

7044.73

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PAYCHEX OF NEW YORK LLCMailing Address 714 BROOK STREET
SUITE 120City
ROCKY HILLState
CTZip Code
06067

Purpose of Disbursement

PAYROLL TAXES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.6694**

Amount of Each Disbursement this Period

3720.27

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

16025.39

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

Full Name (Last, First, Middle Initial)

A. PAYCHEX OF NEW YORK LLCMailing Address 714 BROOK STREET
SUITE 120City
ROCKY HILLState
CTZip Code
06067Purpose of Disbursement
PAYROLL SERVICE FEES

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

State: District:Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	5			2	0	2	4	

FEC Identification Number

C Transaction ID : SB21B.6695

Amount of Each Disbursement this Period

49.42

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PAYCHEX OF NEW YORK LLCMailing Address 714 BROOK STREET
SUITE 120City
ROCKY HILLState
CTZip Code
06067Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

State: District:Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	4	

FEC Identification Number

C Transaction ID : SB21B.6696

Amount of Each Disbursement this Period

3720.27

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PAYCHEX OF NEW YORK LLCMailing Address 714 BROOK STREET
SUITE 120City
ROCKY HILLState
CTZip Code
06067Purpose of Disbursement
PAYROLL

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

State: District:Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	4	

FEC Identification Number

C Transaction ID : SB21B.6697

Amount of Each Disbursement this Period

7044.73

☐ Memo Item

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

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

10814.42

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

Full Name (Last, First, Middle Initial)

A. PAYCHEX OF NEW YORK LLCMailing Address 714 BROOK STREET
SUITE 120City
ROCKY HILLState
CTZip Code
06067Purpose of Disbursement
PAYROLL SERVICE FEES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 29 / 2024

FEC Identification Number

C Transaction ID : SB21B.6698

Amount of Each Disbursement this Period

49.42

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PBIA AIRPORT PARKING

Mailing Address 846 PALM BEACH INTERNATIONAL AIRPO

City
WEST PALM BEACHState
FLZip Code
33406Purpose of Disbursement
CREDIT CARD PMT [SB21B.6654]: TRAVEL: PARKING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 16 / 2024

FEC Identification Number

C Transaction ID : SB21B.6795

Amount of Each Disbursement this Period

51.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. PFEIFFER PUBLIC AFFAIRS, LLCMailing Address 8 THE GREEN SUITE
#11328City
DOVERState
DEZip Code
19901Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 26 / 2024

FEC Identification Number

C Transaction ID : SB21B.6699

Amount of Each Disbursement this Period

10000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10049.42

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

Full Name (Last, First, Middle Initial)

A. PFEIFFER PUBLIC AFFAIRS, LLCMailing Address 8 THE GREEN SUITE
#11328City
DOVERState
DEZip Code
19901

Purpose of Disbursement

TRAVEL: STAFF

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	7			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.6700**

Amount of Each Disbursement this Period

459.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PROUD FOOT & BIRD

Mailing Address 1000 WALNUT ST

City
DES MOINESState
IAZip Code
50309

Purpose of Disbursement

CREDIT CARD PMT [SB21B.6654]: EVENT EXPENSE: FACILITY RENTAL

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	5			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.6813**

Amount of Each Disbursement this Period

714.21

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. RAPID RESPONSE DIGITAL LLC

Mailing Address 516 S DIXIE HWY

City
WEST PALM BEACHState
FLZip Code
33401

Purpose of Disbursement

DIGITAL CONSULTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	7			2	0	2	4	

FEC Identification Number

C**Transaction ID : SB21B.6701**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7959.33

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

Full Name (Last, First, Middle Initial)

A. SAWGRASS STRATEGIES, LLC

Mailing Address 3484 LAKESHORE DRIVE

City
TALLAHASSEEState
FLZip Code
32301Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	1							2024

FEC Identification Number

C**Transaction ID : SB21B.6702**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SHARPSTEEN, MATTHEW, , ,Mailing Address 4334 N FLAGLER DR
UNIT 1604City
WEST PALM BEACHState
FLZip Code
33407Purpose of Disbursement
GRAPHIC DESIGN: COLLATERAL

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	1							2024

FEC Identification Number

C**Transaction ID : SB21B.6691**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SHELL SERVICE STATION

Mailing Address 12700 NORTHBOROUGH DR

City
HOUSTONState
TXZip Code
77067Purpose of Disbursement
CREDIT CARD PMT [SB21B.6654]: TRAVEL: FUEL

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	1							2024

FEC Identification Number

C**Transaction ID : SB21B.6800**

Amount of Each Disbursement this Period

71.05

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

8000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

Full Name (Last, First, Middle Initial)

A. TARGET

Mailing Address 500 NORTH CONGRESS AVE

City
WEST PALM BEACHState
FLZip Code
33401

Purpose of Disbursement

CREDIT CARD PMT [SB21B.6654]: OFFICE SUPPLIES

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	1			0	8			2	0	2	4		

FEC Identification Number

C **Transaction ID : SB21B.6794**

Amount of Each Disbursement this Period

 42.78☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THREE ARBOR INSURANCE, INCMailing Address 2828 OLD 280 CT
STE 126City
VESTAVIAState
ALZip Code
35243

Purpose of Disbursement

INSURANCE

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	2			0	1			2	0	2	4		

FEC Identification Number

C **Transaction ID : SB21B.6703**

Amount of Each Disbursement this Period

 16939.61☐ Memo Item

Full Name (Last, First, Middle Initial)

C. VISTAPRINT

Mailing Address 95 HAYDEN AVE

City
LEXINGTONState
MAZip Code
02421

Purpose of Disbursement

CREDIT CARD PMT [SB21B.6654]: PRINTING EXPENSE

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	1			1	8			2	0	2	4		

FEC Identification Number

C **Transaction ID : SB21B.6811**

Amount of Each Disbursement this Period

 525.13☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 16939.61

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

Full Name (Last, First, Middle Initial)

A. WALL STREET JOURNAL

Mailing Address 4300 RTE 1 NORTH

City
SOUTH BRUNSWICKState
NJZip Code
08852

Purpose of Disbursement

CREDIT CARD PMT [SB21B.6654]: SUBSCRIPTIONS

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	2							2024

FEC Identification Number

C **Transaction ID : SB21B.6784**

Amount of Each Disbursement this Period

 2.00☒ Memo Item

Full Name (Last, First, Middle Initial)

B.

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

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

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

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

436590.20

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☒ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

MAKE AMERICA GREAT AGAIN INC.

Full Name (Last, First, Middle Initial)

A. SAVE AMERICA

Mailing Address P.O. BOX 13570

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	1							2024

FEC Identification Number

C C00762591**Transaction ID : SB28C.6651**

Amount of Each Disbursement this Period

5000000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5000000.00

5000000.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 49 OF 59
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) MAKE AMERICA GREAT AGAIN INC.		FEC IDENTIFICATION NUMBER ▼ CC00825851	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M M / D D D / Y Y Y Y Y Y			
Full Name of Payee DEL RAY MEDIA LLC ☐ Memo Item		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 03 04 2024	
Mailing Address P.O. BOX 1309		Amount 132012.03 Transaction ID : SE.6602 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 02 29 2024	
City ALEXANDRIA State VA Zip Code 22313			
Purpose of Expenditure PLACED MEDIA: RADIO AD		Category/ Type	
Name of Federal Candidate: TRUMP, DONALD J., , ,		☒ Support ☐ Oppose Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: <u>GA</u>	
Calendar Year-To-Date Per Election for Office Sought 132012.03		Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶ _____	
Full Name of Payee DEL RAY MEDIA LLC ☐ Memo Item		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 03 04 2024	
Mailing Address P.O. BOX 1309		Amount 268024.42 Transaction ID : SE.6603 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 02 29 2024	
City ALEXANDRIA State VA Zip Code 22313			
Purpose of Expenditure PLACED MEDIA: RADIO AD		Category/ Type	
Name of Federal Candidate: BIDEN, JOSEPH R JR., , ,		☐ Support ☒ Oppose Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: <u>GA</u>	
Calendar Year-To-Date Per Election for Office Sought 400036.45		Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures 400036.45 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature GANTT, CHARLES, , ,		Date M M M / D D D / Y Y Y Y Y Y 03 20 2024	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 50 OF 59
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) MAKE AMERICA GREAT AGAIN INC.		FEC IDENTIFICATION NUMBER ▼ CC00825851		
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M M / D D D / Y Y Y Y Y Y				
Full Name of Payee DEL RAY MEDIA LLC ☐ Memo Item		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 03 04 2024		
Mailing Address P.O. BOX 1309		Amount 63197.25		
<table border="1" style="width:100%; border-collapse: collapse;"><tr><td style="width:33%;">City ALEXANDRIA</td><td style="width:17%;">State VA</td><td style="width:50%;">Zip Code 22313</td></tr></table>				City ALEXANDRIA
City ALEXANDRIA	State VA	Zip Code 22313		
Purpose of Expenditure PLACED MEDIA: RADIO AD		Category/ Type		
Name of Federal Candidate: TRUMP, DONALD J., , ,		☒ Support ☐ Oppose Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶ _____		
Full Name of Payee DEL RAY MEDIA LLC ☐ Memo Item		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 03 04 2024		
Mailing Address P.O. BOX 1309		Amount 128309.56		
<table border="1" style="width:100%; border-collapse: collapse;"><tr><td style="width:33%;">City ALEXANDRIA</td><td style="width:17%;">State VA</td><td style="width:50%;">Zip Code 22313</td></tr></table>				City ALEXANDRIA
City ALEXANDRIA	State VA	Zip Code 22313		
Purpose of Expenditure PLACED MEDIA: RADIO AD		Category/ Type		
Name of Federal Candidate: BIDEN, JOSEPH R JR., , ,		☐ Support ☒ Oppose Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures	191506.81
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature

Date

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 51 OF 59
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NAME OF COMMITTEE (In Full) MAKE AMERICA GREAT AGAIN INC.				FEC IDENTIFICATION NUMBER ▼ C C00825851	
Check if ☐ 24-hour report ☐ 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee DEL RAY MEDIA LLC ☐ Memo Item				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 04 / 2024	
Mailing Address P.O. BOX 1309				Amount 85667.38	
City ALEXANDRIA		State VA		Zip Code 22313	
Purpose of Expenditure PLACED MEDIA: RADIO AD				Category/ Type	
Name of Federal Candidate: TRUMP, DONALD J., , ,				☒ Support ☐ Oppose Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought 85667.38				Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶ _____	
Full Name of Payee DEL RAY MEDIA LLC ☐ Memo Item				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 04 / 2024	
Mailing Address P.O. BOX 1309				Amount 173930.75	
City ALEXANDRIA		State VA		Zip Code 22313	
Purpose of Expenditure PLACED MEDIA: RADIO AD				Category/ Type	
Name of Federal Candidate: BIDEN, JOSEPH R JR., , ,				☐ Support ☒ Oppose Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought 259598.13				Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures 259598.13 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>GANTT, CHARLES, , ,</u>				Date M M / D D / Y Y Y Y Y Y 03 / 20 / 2024	

SCHEDULE E (FEC Form 3X)
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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) MAKE AMERICA GREAT AGAIN INC.				FEC IDENTIFICATION NUMBER ▼ C C00825851	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee ELECTORAL COMMUNICATIONS GROUP LLC ☐ Memo Item				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 12 / 2024	
Mailing Address 701 S HOWARD AVE STE 106-848				Amount 66643.56	
City TAMPA		State FL	Zip Code 33606	Transaction ID : SE.6565 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 12 / 2024	
Purpose of Expenditure TEXT MESSAGES			Category/ Type		
Name of Federal Candidate: TRUMP, DONALD J., , ,			☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought			66643.56	Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶ _____	
Full Name of Payee ELECTORAL COMMUNICATIONS GROUP LLC ☐ Memo Item				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 15 / 2024	
Mailing Address 701 S HOWARD AVE STE 106-848				Amount 33432.57	
City TAMPA		State FL	Zip Code 33606	Transaction ID : SE.6568 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 15 / 2024	
Purpose of Expenditure TEXT MESSAGES			Category/ Type		
Name of Federal Candidate: TRUMP, DONALD J., , ,			☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought			100076.13	Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures				100076.13	
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>GANTT, CHARLES, , ,</u>			Date M M / D D / Y Y Y Y Y Y 03 / 20 / 2024		

SCHEDULE E (FEC Form 3X)
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NAME OF COMMITTEE (In Full) MAKE AMERICA GREAT AGAIN INC.			FEC IDENTIFICATION NUMBER ▼ C C00825851	
Check if ☐ 24-hour report ☐ 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee ELECTORAL COMMUNICATIONS GROUP LLC ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 15 / 2024	
Mailing Address 701 S HOWARD AVE STE 106-848			Amount 33432.57	
City TAMPA	State FL	Zip Code 33606	Transaction ID : SE.6569 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 15 / 2024	
Purpose of Expenditure TEXT MESSAGES			Category/ Type	
Name of Federal Candidate: BIDEN, JOSEPH R JR, , , ☐ Support ☒ Oppose			Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought 133508.70			Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶ _____	
Full Name of Payee ELECTORAL COMMUNICATIONS GROUP LLC ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 17 / 2024	
Mailing Address 701 S HOWARD AVE STE 106-848			Amount 121842.00	
City TAMPA	State FL	Zip Code 33606	Transaction ID : SE.6577 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 16 / 2024	
Purpose of Expenditure TEXT MESSAGES			Category/ Type	
Name of Federal Candidate: HALEY, NIKKI, , , ☐ Support ☒ Oppose			Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought 255350.70			Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures 155274.57 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature GANTT, CHARLES, , ,			Date M M / D D / Y Y Y Y Y Y 03 / 20 / 2024	

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 54 OF 59
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NAME OF COMMITTEE (In Full) MAKE AMERICA GREAT AGAIN INC.				FEC IDENTIFICATION NUMBER ▼ C C00825851	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee ELECTORAL COMMUNICATIONS GROUP LLC ☐ Memo Item				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 17 / 2024	
Mailing Address 701 S HOWARD AVE STE 106-848				Amount 30460.50	
City TAMPA		State FL	Zip Code 33606	Transaction ID : SE.6578 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 16 / 2024	
Purpose of Expenditure TEXT MESSAGES Category/Type					
Name of Federal Candidate: BIDEN, JOSEPH R JR, , , ☐ Support ☒ Oppose				Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought 285811.20				Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶ _____	
Full Name of Payee ELECTORAL COMMUNICATIONS GROUP LLC ☐ Memo Item				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 17 / 2024	
Mailing Address 701 S HOWARD AVE STE 106-848				Amount 30460.50	
City TAMPA		State FL	Zip Code 33606	Transaction ID : SE.6579 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 16 / 2024	
Purpose of Expenditure TEXT MESSAGES Category/Type					
Name of Federal Candidate: TRUMP, DONALD J., , , ☒ Support ☐ Oppose				Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought 316271.70				Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures 60921.00 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>GANTT, CHARLES, , ,</u>				Date M M / D D / Y Y Y Y Y Y 03 / 20 / 2024	

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 55 OF 59
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NAME OF COMMITTEE (In Full) MAKE AMERICA GREAT AGAIN INC.				FEC IDENTIFICATION NUMBER ▼ C C00825851	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee ELECTORAL COMMUNICATIONS GROUP LLC ☐ Memo Item				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 20 / 2024	
Mailing Address 701 S HOWARD AVE STE 106-848				Amount 51017.32	
City TAMPA		State FL	Zip Code 33606	Transaction ID : SE.6584 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 20 / 2024	
Purpose of Expenditure TEXT MESSAGES			Category/ Type		
Name of Federal Candidate: TRUMP, DONALD J., , ,			☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought			367289.02	Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶ _____	
Full Name of Payee ELECTORAL COMMUNICATIONS GROUP LLC ☐ Memo Item				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 20 / 2024	
Mailing Address 701 S HOWARD AVE STE 106-848				Amount 102034.64	
City TAMPA		State FL	Zip Code 33606	Transaction ID : SE.6585 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 20 / 2024	
Purpose of Expenditure TEXT MESSAGES			Category/ Type		
Name of Federal Candidate: HALEY, NIKKI, , ,			☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought			469323.66	Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures				153051.96	
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>GANTT, CHARLES, , ,</u>			Date M M / D D / Y Y Y Y Y Y 03 / 20 / 2024		

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 56 OF 59
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NAME OF COMMITTEE (In Full) MAKE AMERICA GREAT AGAIN INC.				FEC IDENTIFICATION NUMBER ▼ C C00825851	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee ELECTORAL COMMUNICATIONS GROUP LLC ☐ Memo Item				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 23 / 2024	
Mailing Address 701 S HOWARD AVE STE 106-848				Amount 47608.80	
City TAMPA		State FL	Zip Code 33606	Transaction ID : SE.6597 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 23 / 2024	
Purpose of Expenditure TEXT MESSAGES Category/Type					
Name of Federal Candidate: TRUMP, DONALD J., , , ☒ Support ☐ Oppose				Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought 644932.46				Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶ _____	
Full Name of Payee ELECTORAL COMMUNICATIONS GROUP LLC ☐ Memo Item				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 23 / 2024	
Mailing Address 701 S HOWARD AVE STE 106-848				Amount 47608.80	
City TAMPA		State FL	Zip Code 33606	Transaction ID : SE.6598 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 23 / 2024	
Purpose of Expenditure TEXT MESSAGES Category/Type					
Name of Federal Candidate: BIDEN, JOSEPH R JR., , , ☐ Support ☒ Oppose				Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought 692541.26				Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures 95217.60 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>GANTT, CHARLES, , ,</u>				Date M M / D D / Y Y Y Y Y Y 03 / 20 / 2024	

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 57 OF 59
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NAME OF COMMITTEE (In Full) MAKE AMERICA GREAT AGAIN INC.				FEC IDENTIFICATION NUMBER ▼ C C00825851	
Check if ☐ 24-hour report ☐ 48-hour report ▶ New report Amends report filed on				M M / D D / Y Y Y Y Y Y	
Full Name of Payee GO BIG MEDIA			☐ Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 16 / 2024	
Mailing Address 44 CANAL CENTER PLZ STE 315			City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Expenditure DIGITAL ADVERTISING			Category/ Type	Amount 1000.00 Transaction ID : SE.6573 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 16 / 2024	
Name of Federal Candidate: BIDEN, JOSEPH R JR, , ,			☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: <u>CA</u>	
Calendar Year-To-Date Per Election for Office Sought			1000.00	Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶ _____	
Full Name of Payee GO BIG MEDIA			☐ Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 16 / 2024	
Mailing Address 44 CANAL CENTER PLZ STE 315			City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Expenditure PRODUCTION COST: DIGITAL AD			Category/ Type	Amount 650.00 Transaction ID : SE.6574 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 16 / 2024	
Name of Federal Candidate: BIDEN, JOSEPH R JR, , ,			☐ Support ☒ Oppose	Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: <u>CA</u>	
Calendar Year-To-Date Per Election for Office Sought			1650.00	Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures				1650.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>GANTT, CHARLES, , ,</u>			Date M M / D D / Y Y Y Y Y Y 03 / 20 / 2024		

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 58 OF 59
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) MAKE AMERICA GREAT AGAIN INC.			FEC IDENTIFICATION NUMBER ▼ C C00825851	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee GO BIG MEDIA ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 20 / 2024	
Mailing Address 44 CANAL CENTER PLZ STE 315			Amount 93750.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE.6588 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 20 / 2024	
Purpose of Expenditure DIGITAL ADVERTISING			Category/ Type	
Name of Federal Candidate: TRUMP, DONALD J., , ,			☒ Support ☐ Oppose Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought 563073.66			Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶ _____	
Full Name of Payee GO BIG MEDIA ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 20 / 2024	
Mailing Address 44 CANAL CENTER PLZ STE 315			Amount 2250.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE.6589 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 20 / 2024	
Purpose of Expenditure PRODUCTION COST: DIGITAL AD			Category/ Type	
Name of Federal Candidate: TRUMP, DONALD J., , ,			☒ Support ☐ Oppose Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought 565323.66			Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures			96000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>GANTT, CHARLES, , ,</u>			Date M M / D D / Y Y Y Y Y Y 03 / 20 / 2024	

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 59 OF 59
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) MAKE AMERICA GREAT AGAIN INC.			FEC IDENTIFICATION NUMBER ▼ C C00825851	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY				
Full Name of Payee GO BIG MEDIA ☐ Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 20 / 2024	
Mailing Address 44 CANAL CENTER PLZ STE 315			Amount 31250.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE.6592 Date of Disbursement or Obligation MM / DD / YYYY 02 / 20 / 2024	
Purpose of Expenditure DIGITAL ADVERTISING		Category/ Type	Name of Federal Candidate: HALEY, NIKKI, , , ☐ Support ☒ Oppose Office Sought: ☐ House ☒ President ☐ Senate District: _____ State: SC	
Calendar Year-To-Date Per Election for Office Sought		596573.66	Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶ _____	
Full Name of Payee GO BIG MEDIA ☐ Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 20 / 2024	
Mailing Address 44 CANAL CENTER PLZ STE 315			Amount 750.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE.6593 Date of Disbursement or Obligation MM / DD / YYYY 02 / 20 / 2024	
Purpose of Expenditure PRODUCTION COST: DIGITAL AD		Category/ Type	Name of Federal Candidate: HALEY, NIKKI, , , ☐ Support ☒ Oppose Office Sought: ☐ House ☒ President ☐ Senate District: _____ State: SC	
Calendar Year-To-Date Per Election for Office Sought		597323.66	Disbursement For: ☒ Primary ☐ General 2024 ☐ Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures			32000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures			1545332.65	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature GANTT, CHARLES, , ,			Date MM / DD / YYYY 03 / 20 / 2024	