

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 OPPORTUNITY MATTERS FUND, INC.

ADDRESS (number and street) C/O BULLDOG COMPLIANCE 138 CONANT STREET 2ND FLR BEVERLY MA 01915 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00750182 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

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

5. Covering Period 01 / 26 / 2021 through 06 / 30 / 2021

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

Signature of Treasurer GANTT, CHARLES, , , [Electronically Filed] Date 07 / 30 / 2021

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**OPPORTUNITY MATTERS FUND, INC.**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2021"/>		<input type="text" value="2708488.07"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2543864.07"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="5428117.93"/>	<input type="text" value="5429117.93"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="7971982.00"/>	<input type="text" value="8137606.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="355249.70"/>	<input type="text" value="520873.70"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="7616732.30"/>	<input type="text" value="7616732.30"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

OPPORTUNITY MATTERS FUND, INC.

Report Covering the Period: From: 01 / 26 / 2021 To: 06 / 30 / 2021

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5426092.93	5427092.93
(ii) Unitemized .....	25.00	25.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5426117.93	5427117.93
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2000.00	2000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	5428117.93	5429117.93
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	5428117.93	5429117.93
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	5428117.93	5429117.93

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	340249.70	410873.70
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	340249.70	410873.70
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	95000.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	15000.00	15000.00
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)) ..	355249.70	520873.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	355249.70	520873.70

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	5428117.93	5429117.93
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5428117.93	5429117.93
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	340249.70	410873.70
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	340249.70	410873.70

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 35
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)  
**OPPORTUNITY MATTERS FUND, INC.**

**A. BERKOWITZ, BRUCE, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14 TAHITI BEACH ISLAND RD  
 City CORAL GABLES State FL Zip Code 33143  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 FAIRHOLME CAPITAL MANAGEMENT INVESTMENT ADVISOR  
 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  
 04 / 16 / 2021  
**Transaction ID : SA11AI.5276**  
 Amount of Each Receipt this Period  
 10000.00  
 Memo Item

**B. BREWSTER/JORY ASSOCIATES, LLC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 499 S CAPITOL STREET SW STE 608  
 City WASHINGTON State DC Zip Code 20003-4049  
 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 ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 12 / 2021  
**Transaction ID : SA11AI.5263**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**C. C-30A, LLC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13123 E EMERALD COAST PKWY STE B  
 City INLET BEACH State FL Zip Code 32413  
 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 ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 12 / 2021  
**Transaction ID : SA11AI.5255**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	13500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

**A. CAMERON, RONALD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 21440  
 City LITTLE ROCK State AR Zip Code 72221  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MOUNTAIRE CORP Occupation (for Individual) CHAIRMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 04 / 13 / 2021  
**Transaction ID : SA11AI.5274**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item

**B. DISERNIA, BRIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3605 DELWOOD DR  
 City PANAMA CITY BEACH State FL Zip Code 32408-7404  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 04 / 12 / 2021  
**Transaction ID : SA11AI.5273**  
 Amount of Each Receipt this Period 3000.00  
 Memo Item

**C. ELLISON, LAWRENCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 YGNACIO VALLEY RD SUITE 320  
 City WALNUT CREEK State CA Zip Code 94596-4087  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ORACLE CORPORATION Occupation (for Individual) EXECUTIVE CHAIRMAN AND CTO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1342.93

Date of Receipt 04 / 07 / 2021  
**Transaction ID : SA11AI.5292**  
 Amount of Each Receipt this Period 1342.93  
 Memo Item  
 In-kind - TRAVEL: AIR

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 54342.93  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 35
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

**A. ELLISON, LAWRENCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 YGNACIO VALLEY RD  
 SUITE 320  
 City WALNUT CREEK State CA Zip Code 94596-4087  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ORACLE CORPORATION Occupation (for Individual) EXECUTIVE CHAIRMAN AND CTO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5001342.93

Date of Receipt 06 / 25 / 2021  
**Transaction ID : SA11AI.5283**  
 Amount of Each Receipt this Period 5000000.00  
 Memo Item

**B. FRH HOLDINGS, LLC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 1380  
 City SANTA ROSA BEACH State FL Zip Code 32459  
 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 ▼ 3000.00

Date of Receipt 04 / 12 / 2021  
**Transaction ID : SA11AI.5259**  
 Amount of Each Receipt this Period 3000.00  
 Memo Item

**C. GONZALEZ, JORGE, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 19983  
 City PANAMA CITY BEACH State FL Zip Code 32417  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 04 / 12 / 2021  
**Transaction ID : SA11AI.5261**  
 Amount of Each Receipt this Period 3000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5006000.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 35
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

**A. HOBSON, H, LEE, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4237 ARMSTRONG PKWY  
 City DALLAS State TX Zip Code 75205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HIGHSIDE CAPITAL MANAGEMENT Occupation (for Individual) MANAGING PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 06 / 30 / 2021  
**Transaction ID : SA11AI.5285**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item

**B. INLET BEACH COMMONS, LLC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13123 E EMERALD COAST PKWY STE B  
 City INLET BEACH State FL Zip Code 32413  
 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 ▼ 1000.00

Date of Receipt 04 / 12 / 2021  
**Transaction ID : SA11AI.5253**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. JOHNSTON, KELLY, , MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 121  
 City NEWTOWN SQUARE State PA Zip Code 19073  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 02 / 2021  
**Transaction ID : SA11AI.5250**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	51500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

**A. WINRED**

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2402.30

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 02 / 2021

**Transaction ID : SA11AI.5250.0**

Amount of Each Receipt this Period  
480.70

Memo Item  
 EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

**B. KEISER, MICHAEL, L, ,**

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

Mailing Address 2450 N LAKEVIEW AVE

City CHICAGO	State IL	Zip Code 60614
-----------------	-------------	-------------------

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

Name of Employer (for Individual) BDGR INC	Occupation (for Individual) BUSINESS
---	---

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  
 05 / 17 / 2021

**Transaction ID : SA11AI.5278**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C. KIRTLEY, JOHN, FOSTER, ,**

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

Mailing Address 511 W BAY ST #363

City TAMPA	State FL	Zip Code 33606
---------------	-------------	-------------------

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

Name of Employer (for Individual) J+J INVESTMENT VENTURES LLC	Occupation (for Individual) PARTNER
--	--

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 / 22 / 2021

**Transaction ID : SA11AI.5245**

Amount of Each Receipt this Period  
10000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

**A. NEUBAUER, MARGARET, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 608 SHORELINE DR  
 City PANAMA CITY State FL Zip Code 32404  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ERA NEUBAUER Occupation (for Individual) REALTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 04 / 12 / 2021  
**Transaction ID : SA11AI.5271**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item

**B. OBERNDORF ENTERPRISES, LLC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 615 FRONT ST  
 City SAN FRANCISCO State CA Zip Code 94111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 03 / 09 / 2021  
**Transaction ID : SA11AI.5247**  
 Amount of Each Receipt this Period 100000.00  
 Memo Item

**C. PRENGER, JEANETTE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1601 IRON ST STE 200  
 City KANSAS CITY State MO Zip Code 64116  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ECCO SELECT Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 01 / 26 / 2021  
**Transaction ID : SA11AI.5238**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	101750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 35
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

**A. WINRED**

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1201.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	26	/	2021

**Transaction ID : SA11AI.5238.0**

Amount of Each Receipt this Period  
240.20

Memo Item  
EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

**B. PRENGER, JEANETTE, , ,**

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

Mailing Address 1601 IRON ST STE 200

City KANSAS CITY	State MO	Zip Code 64116
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
ECCO SELECT EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	02	/	2021

**Transaction ID : SA11AI.5239**

Amount of Each Receipt this Period  
250.00

Memo Item  
EARMARKED THROUGH WINRED

**C. WINRED**

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1441.20

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	02	/	2021

**Transaction ID : SA11AI.5239.0**

Amount of Each Receipt this Period  
240.20

Memo Item  
EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

**A. PRENGER, JEANETTE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1601 IRON ST  
 STE 200  
 City KANSAS CITY State MO Zip Code 64116  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ECCO SELECT Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 02 / 18 / 2021  
**Transaction ID : SA11AI.5243**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
**EARMARKED THROUGH WINRED**

**B. WINRED**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 9891  
 City ARLINGTON State VA Zip Code 22219  
 FEC ID number of contributing federal political committee. **C** C00694323  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1681.40

Date of Receipt 02 / 18 / 2021  
**Transaction ID : SA11AI.5243.0**  
 Amount of Each Receipt this Period 240.20  
 Memo Item  
**EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.**

**C. PRENGER, JEANETTE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1601 IRON ST  
 STE 200  
 City KANSAS CITY State MO Zip Code 64116  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ECCO SELECT Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 03 / 18 / 2021  
**Transaction ID : SA11AI.5248**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
**EARMARKED THROUGH WINRED**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 35
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

**A. WINRED**

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1921.60

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2021

**Transaction ID : SA11AI.5248.0**

Amount of Each Receipt this Period  
240.20

Memo Item  
EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

**B. PRENGER, JEANETTE, , ,**

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

Mailing Address 1601 IRON ST STE 200

City KANSAS CITY	State MO	Zip Code 64116
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
ECCO SELECT EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	18	/	2021

**Transaction ID : SA11AI.5277.0**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. WINRED**

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2642.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	18	/	2021

**Transaction ID : SA11AI.5277.0**

Amount of Each Receipt this Period  
240.20

Memo Item  
EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

**A. PRENGER, JEANETTE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1601 IRON ST  
 STE 200  
 City KANSAS CITY State MO Zip Code 64116  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ECCO SELECT Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 18 / 2021  
**Transaction ID : SA11AI.5279**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
**EARMARKED THROUGH WINRED**

**B. WINRED**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 9891  
 City ARLINGTON State VA Zip Code 22219  
 FEC ID number of contributing federal political committee. **C** C00694323  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2882.70

Date of Receipt 05 / 18 / 2021  
**Transaction ID : SA11AI.5279.0**  
 Amount of Each Receipt this Period 240.20  
 Memo Item  
**EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.**

**C. PRENGER, JEANETTE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1601 IRON ST  
 STE 200  
 City KANSAS CITY State MO Zip Code 64116  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ECCO SELECT Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2750.00

Date of Receipt 06 / 18 / 2021  
**Transaction ID : SA11AI.5282**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

**A. WINRED**

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3122.90

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	18	/	2021

**Transaction ID : SA11AI.5282.0**

Amount of Each Receipt this Period  
240.20

Memo Item  
**EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.**

**B. ROWAN, MARC, , ,**

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

Mailing Address 9 W 57TH ST

City NEW YORK	State NY	Zip Code 10019
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) APOLLO GLOBAL MANAGEMENT	Occupation (for Individual) CO-FOUNDER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
150000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	11	/	2021

**Transaction ID : SA11AI.5240**

Amount of Each Receipt this Period  
150000.00

Memo Item

**C. SNAPPIN JACK, INC**

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

Mailing Address 13123 E EMERALD COAST PKWY

City INLET BEACH	State FL	Zip Code 32461
---------------------	-------------	-------------------

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 ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2021

**Transaction ID : SA11AI.5257**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	151000.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

**A. SOUTHERLAND, WILLIAM, STEVE, , II**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 E 19TH ST  
 City PANAMA CITY State FL Zip Code 32405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 04 / 12 / 2021  
**Transaction ID : SA11AI.5265**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

**B. THE ST JOE COMPANY**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 130 RICHARD JACKSON BLVD  
 City PANAMA CITY BEACH State FL Zip Code 32407  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 04 / 12 / 2021  
**Transaction ID : SA11AI.5289**  
 Amount of Each Receipt this Period 3000.00  
 Memo Item

**C. TROUTT, KENNY, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10595 STRAIT LN  
 City DALLAS State TX Zip Code 75229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 06 / 01 / 2021  
**Transaction ID : SA11AI.5281**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 18 OF 35  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. TRUMBULL BOTTLED WATER INC**

Mailing Address 315 E 15TH ST

City PANAMA CITY	State FL	Zip Code 32405-5408
---------------------	-------------	------------------------

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 ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2021

**Transaction ID : SA11AI.5267**

Amount of Each Receipt this Period  
2500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. TRUMBULL WATER SERVICES OF NW FLORIDA**

Mailing Address 315 E 15TH ST

City PANAMA CITY	State FL	Zip Code 32405-5408
---------------------	-------------	------------------------

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 ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2021

**Transaction ID : SA11AI.5269**

Amount of Each Receipt this Period  
2500.00

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. **C**

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

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5426092.93

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

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

FOR LINE NUMBER: PAGE 19 OF 35  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

**A. AMERICAN VICTORY PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 502 MONROE STREET

City NEWPORT	State KY	Zip Code 41071
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00491183

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	12	/	2021

**Transaction ID : SA11C.5367**

Amount of Each Receipt this Period  
2000.00

Memo Item

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

Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

**A. ADVANCED AVIATION TEAM**

Full Name (Last, First, Middle Initial)

Mailing Address 4201 WILSON BLVD  
3RD FLOOR

City ARLINGTON State VA Zip Code 22203

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement MM / DD / YYYY  
03 / 18 / 2021

FEC Identification Number  
C  
Transaction ID : SB21B.5306  
Amount of Each Disbursement this Period  
16566.45

Memo Item

**B. ALASKA AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 68900

City SEATTLE State WA Zip Code 98168

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement MM / DD / YYYY  
03 / 25 / 2021

FEC Identification Number  
C  
Transaction ID : SB21B.5320  
Amount of Each Disbursement this Period  
659.00

Memo Item

**C. AMERICAN AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 1 SKYVIEW DR

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement MM / DD / YYYY  
03 / 08 / 2021

FEC Identification Number  
C  
Transaction ID : SB21B.5303  
Amount of Each Disbursement this Period  
1063.31

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 18288.76

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

**A. AMERICAN AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 1 SKYVIEW DR

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 09 / 2021

FEC Identification Number: C

Transaction ID : SB21B.5328

Amount of Each Disbursement this Period: 58.04

Memo Item

**B. AMERICAN AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 1 SKYVIEW DR

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 09 / 2021

FEC Identification Number: C

Transaction ID : SB21B.5329

Amount of Each Disbursement this Period: 730.66

Memo Item

**C. CHAIN BRIDGE BANK, N.A.**

Full Name (Last, First, Middle Initial)

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 21 / 2021

FEC Identification Number: C

Transaction ID : SB21B.5334

Amount of Each Disbursement this Period: 25.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 813.70

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

Full Name (Last, First, Middle Initial) <b>A. CHAIN BRIDGE BANK, N.A.</b>		Date of Disbursement MM / DD / YYYY 05 / 06 / 2021
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5337</b> Amount of Each Disbursement this Period [ ] 25.00
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK FEE		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CHAIN BRIDGE BANK, N.A.</b>		Date of Disbursement MM / DD / YYYY 05 / 06 / 2021
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5338</b> Amount of Each Disbursement this Period [ ] 25.00
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK FEE		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CHAIN BRIDGE BANK, N.A.</b>		Date of Disbursement MM / DD / YYYY 05 / 13 / 2021
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5344</b> Amount of Each Disbursement this Period [ ] 25.00
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK FEE		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 75.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

Full Name (Last, First, Middle Initial) <b>A. CHAIN BRIDGE BANK, N.A.</b>		Date of Disbursement MM / DD / YYYY 05 / 14 / 2021	
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5348</b>	
City MCLEAN	State VA	Zip Code 22101	Amount of Each Disbursement this Period [ ] 25.00
Purpose of Disbursement BANK FEE		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: [ ]	District: [ ]		

Full Name (Last, First, Middle Initial) <b>B. CHAIN BRIDGE BANK, N.A.</b>		Date of Disbursement MM / DD / YYYY 05 / 18 / 2021	
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5354</b>	
City MCLEAN	State VA	Zip Code 22101	Amount of Each Disbursement this Period [ ] 25.00
Purpose of Disbursement BANK FEE		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: [ ]	District: [ ]		

Full Name (Last, First, Middle Initial) <b>C. CHAIN BRIDGE BANK, N.A.</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2021	
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5361</b>	
City MCLEAN	State VA	Zip Code 22101	Amount of Each Disbursement this Period [ ] 25.00
Purpose of Disbursement BANK FEE		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: [ ]	District: [ ]		

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

[ ] 75.00

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

[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

Full Name (Last, First, Middle Initial) <b>A. CHAIN BRIDGE BANK, N.A.</b>		Date of Disbursement MM / DD / YYYY 06 / 22 / 2021
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5363</b>
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period [ ] 25.00
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. DELVE LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 06 / 2021
Mailing Address 1146 19TH STREET NW STE 200		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5340</b>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement RESEARCH CONSULTING		Amount of Each Disbursement this Period [ ] 7500.00
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. DELVE LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 06 / 2021
Mailing Address 1146 19TH STREET NW STE 200		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5341</b>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement RESEARCH CONSULTING		Amount of Each Disbursement this Period [ ] 7500.00
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 15025.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

Full Name (Last, First, Middle Initial) <b>A. DELVE LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 13 / 2021
Mailing Address 1146 19TH STREET NW STE 200		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5345</b> Amount of Each Disbursement this Period [ ] 7500.00
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement RESEARCH CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. DICKINSON WRIGHT PLLC</b>		Date of Disbursement MM / DD / YYYY 02 / 02 / 2021
Mailing Address 1825 EYE ST NW STE 900		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5296</b> Amount of Each Disbursement this Period [ ] 5532.50
City WASHINGTON	State DC	Zip Code 20006
Purpose of Disbursement LEGAL CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. DICKINSON WRIGHT PLLC</b>		Date of Disbursement MM / DD / YYYY 05 / 06 / 2021
Mailing Address 1825 EYE ST NW STE 900		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5342</b> Amount of Each Disbursement this Period [ ] 10803.25
City WASHINGTON	State DC	Zip Code 20006
Purpose of Disbursement LEGAL CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 23835.75
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

Full Name (Last, First, Middle Initial) <b>A. ELLISON, LAWRENCE, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 07 / 2021
Mailing Address 101 YGNACIO VALLEY RD SUITE 320		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5293</b> Amount of Each Disbursement this Period [REDACTED] 1342.93
City WALNUT CREEK	State CA	Zip Code 94596-4087
Purpose of Disbursement In-kind - TRAVEL: AIR		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. FOUR SEASONS LANAI CITY HI</b>		Date of Disbursement MM / DD / YYYY 05 / 13 / 2021
Mailing Address ONE KEOMOKU HIGHWAY		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5347</b> Amount of Each Disbursement this Period [REDACTED] 1230.72
City LANAI CITY	State HI	Zip Code 96763
Purpose of Disbursement TRAVEL: LODGING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. GRAND HYATT DFW</b>		Date of Disbursement MM / DD / YYYY 04 / 12 / 2021
Mailing Address 2337 S INTERNATIONAL PKWY		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5331</b> Amount of Each Disbursement this Period [REDACTED] 291.87
City DALLAS	State TX	Zip Code 75261
Purpose of Disbursement TRAVEL: LODGING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

[REDACTED] 2865.52

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

Full Name (Last, First, Middle Initial) <b>A. HAWAIIAN AIRLINES</b>		Date of Disbursement MM / DD / YYYY 03 / 08 / 2021	
Mailing Address P.O. BOX 30008		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5304</b> Amount of Each Disbursement this Period [ ] 1950.58	
City HONOLULU	State HI	Zip Code 96820	Category/ Type [ ]
Purpose of Disbursement TRAVEL: AIR		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. HAWAIIAN AIRLINES</b>		Date of Disbursement MM / DD / YYYY 03 / 18 / 2021	
Mailing Address P.O. BOX 30008		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5308</b> Amount of Each Disbursement this Period [ ] 808.00	
City HONOLULU	State HI	Zip Code 96820	Category/ Type [ ]
Purpose of Disbursement TRAVEL: AIR		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. HAWAIIAN AIRLINES</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2021	
Mailing Address P.O. BOX 30008		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5323</b> Amount of Each Disbursement this Period [ ] 80.00	
City HONOLULU	State HI	Zip Code 96820	Category/ Type [ ]
Purpose of Disbursement TRAVEL: AIR		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 2838.58
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

Full Name (Last, First, Middle Initial) <b>A. HAWAIIAN AIRLINES</b>		Date of Disbursement MM / DD / YYYY 04 / 05 / 2021	
Mailing Address P.O. BOX 30008		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5324</b> Amount of Each Disbursement this Period [ ] 30.00	
City HONOLULU	State HI	Zip Code 96820	Category/ Type [ ]
Purpose of Disbursement TRAVEL: AIR		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. HIGHWOOD CAPITAL, LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 18 / 2021	
Mailing Address 1724 20TH ST NW STE 102		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5310</b> Amount of Each Disbursement this Period [ ] 11000.00	
City WASHINGTON	State DC	Zip Code 20009	Category/ Type [ ]
Purpose of Disbursement FUNDRAISING CONSULTANT		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. LANAI EXPEDITIONS</b>		Date of Disbursement MM / DD / YYYY 03 / 24 / 2021	
Mailing Address 658 FRONT ST STE 127		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5314</b> Amount of Each Disbursement this Period [ ] 240.00	
City LAHAINA	State HI	Zip Code 96761	Category/ Type [ ]
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 11270.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

Full Name (Last, First, Middle Initial) <b>A. LANAI EXPEDITIONS</b>		Date of Disbursement MM / DD / YYYY 03 / 24 / 2021
Mailing Address 658 FRONT ST STE 127		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5315</b> Amount of Each Disbursement this Period [ ] 360.00
City LAHAINA	State HI	Zip Code 96761
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. LANAI EXPEDITIONS</b>		Date of Disbursement MM / DD / YYYY 03 / 24 / 2021
Mailing Address 658 FRONT ST STE 127		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5316</b> Amount of Each Disbursement this Period [ ] 360.00
City LAHAINA	State HI	Zip Code 96761
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. MAJORITY MONEY</b>		Date of Disbursement MM / DD / YYYY 02 / 11 / 2021
Mailing Address 12854 KENAN DRIVE SUITE 145		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5301</b> Amount of Each Disbursement this Period [ ] 8000.00
City JACKSONVILLE	State FL	Zip Code 32258
Purpose of Disbursement FUNDRAISING CONSULTANT		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 8720.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

Full Name (Last, First, Middle Initial) <b>A. MAJORITY STRATEGIES, LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 18 / 2021
Mailing Address 12854 KENAN DR STE 145		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5311</b> Amount of Each Disbursement this Period [ ] 376.20
City JACKSONVILLE	State FL	Zip Code 32258
Purpose of Disbursement MEDIA DESIGN		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. MAJORITY STRATEGIES, LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2021
Mailing Address 12854 KENAN DR STE 145		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5322</b> Amount of Each Disbursement this Period [ ] 4000.00
City JACKSONVILLE	State FL	Zip Code 32258
Purpose of Disbursement FUNDRAISING CONSULTANT		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. MAJORITY STRATEGIES, LLC</b>		Date of Disbursement MM / DD / YYYY 04 / 21 / 2021
Mailing Address 12854 KENAN DR STE 145		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5335</b> Amount of Each Disbursement this Period [ ] 40000.00
City JACKSONVILLE	State FL	Zip Code 32258
Purpose of Disbursement ONLINE ADVERTISING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 44376.20
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

Full Name (Last, First, Middle Initial) <b>A. MAJORITY STRATEGIES, LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 06 / 2021
Mailing Address 12854 KENAN DR STE 145		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5343</b> Amount of Each Disbursement this Period 15000.00
City JACKSONVILLE	State FL	Zip Code 32258
Purpose of Disbursement ONLINE ADVERTISING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. MAJORITY STRATEGIES, LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2021
Mailing Address 12854 KENAN DR STE 145		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5362</b> Amount of Each Disbursement this Period 25000.00
City JACKSONVILLE	State FL	Zip Code 32258
Purpose of Disbursement ONLINE ADVERTISING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. MARRIOTT IRVINE</b>		Date of Disbursement MM / DD / YYYY 06 / 07 / 2021
Mailing Address 18000 VON KARMAN AVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5360</b> Amount of Each Disbursement this Period 433.96
City IRVINE	State CA	Zip Code 92612
Purpose of Disbursement TRAVEL: LODGING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	40433.96
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

Full Name (Last, First, Middle Initial) <b>A. MOUNTAIN TOP ADVISORS, LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 14 / 2021
Mailing Address 1100 NEW JERSEY AVE SE STE 2163		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5349</b> Amount of Each Disbursement this Period [ ] 45700.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement DIGITAL CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. MOUNTAIN TOP ADVISORS, LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 14 / 2021
Mailing Address 1100 NEW JERSEY AVE SE STE 2163		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5350</b> Amount of Each Disbursement this Period [ ] 39000.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. MOUNTAIN TOP ADVISORS, LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 14 / 2021
Mailing Address 1100 NEW JERSEY AVE SE STE 2163		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5351</b> Amount of Each Disbursement this Period [ ] 32500.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement STRATEGY AND FUNDRAISING CONSULTANT EXPENSES: TRAVEL: AIR, LODGING AND GROUND TRANSPORTATION		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 117200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

Full Name (Last, First, Middle Initial) <b>A. MOUNTAINTOP ADVISORS, LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 14 / 2021
Mailing Address 1100 NEW JERSEY AVE SE STE 2163		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5352</b>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement STRATEGY CONSULTING		Amount of Each Disbursement this Period [REDACTED] 18970.00
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MOUNTAINTOP ADVISORS, LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 14 / 2021
Mailing Address 1100 NEW JERSEY AVE SE STE 2163		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5353</b>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement WEBSITE DEVELOPMENT		Amount of Each Disbursement this Period [REDACTED] 20625.00
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. NATIONAL AD PLACEMENT</b>		Date of Disbursement MM / DD / YYYY 05 / 18 / 2021
Mailing Address PO BOX 191271		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5355</b>
City DALLAS	State TX	Zip Code 75219
Purpose of Disbursement DIGITAL PRODUCTION COSTS		Amount of Each Disbursement this Period [REDACTED] 10000.00
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 49595.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

Full Name (Last, First, Middle Initial) <b>A. THE BEVERLY HILTON</b>		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 9876 WILSHIRE BLVD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5358</b> Amount of Each Disbursement this Period [ ] 541.28
City BEVERLY HILLS	State CA	Zip Code 90210
Purpose of Disbursement TRAVEL: LODGING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. WATERCOLOR INN RESORT</b>		Date of Disbursement MM / DD / YYYY 03 / 24 / 2021
Mailing Address 25 CENTRAL SQUARE UNIT C-2		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5318</b> Amount of Each Disbursement this Period [ ] 911.68
City SANTA ROSA BEACH	State FL	Zip Code 32459
Purpose of Disbursement TRAVEL: LODGING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. WESTIN MAUI RESORT</b>		Date of Disbursement MM / DD / YYYY 04 / 12 / 2021
Mailing Address 2365 KAA NAPALI PKWY		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5333</b> Amount of Each Disbursement this Period [ ] 3104.43
City LAHAINA	State HI	Zip Code 96761
Purpose of Disbursement TRAVEL: LODGING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 4557.39
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ] 339969.86

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**OPPORTUNITY MATTERS FUND, INC.**

**A. YOUNG REPUBLICAN NATIONAL FEDERATION, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 11341 JAYNES ST

City OMAHA State NE Zip Code 68164

Purpose of Disbursement CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 22 / 2021

FEC Identification Number: C

Transaction ID : SB29.5369

Amount of Each Disbursement this Period: 15000.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	15000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	15000.00