

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**
AMERICA FIRST ACTION, INC.

ADDRESS (number and street) **1400 Crystal Drive**
Suite 850
 Check if different than previously reported. (ACC) **Arlington VA 22202**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00637512 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / 2018 through / / 2018

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

Signature of Treasurer PROCH, JON, , , [Electronically Filed] Date / / 2018

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

AMERICA FIRST ACTION, 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="2018"/>		1899129.69
(b) Cash on Hand at Beginning of Reporting Period.....	6894528.28	
(c) Total Receipts (from Line 19)	5025310.20	12361727.16
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	11919838.48	14260856.85
7. Total Disbursements (from Line 31).....	660358.47	3001376.84
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	11259480.01	11259480.01
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:

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

AMERICA FIRST ACTION, INC.

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4967994.00	12211435.00
(ii) Unitemized	57316.20	144825.67
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5025310.20	12356260.67
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	5025310.20	12356260.67
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	5466.49
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)).....▶	5025310.20	12361727.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	5025310.20	12361727.16

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	483867.43	1378542.66
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	483867.43	1378542.66
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)	176380.04	1621733.18
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	111.00	1101.00
(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)).....	111.00	1101.00
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)) ..	660358.47	3001376.84
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	660358.47	3001376.84

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)	5025310.20	12356260.67
34. Total Contribution Refunds (from Line 28(d))	111.00	1101.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5025199.20	12355159.67
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	483867.43	1378542.66
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	5466.49
38. Net Operating Expenditures (subtract Line 37 from Line 36)	483867.43	1373076.17

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 100
<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

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)
AMERICA FIRST ACTION, INC.

A. ALLEN, BLAIR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2601 COLLEGE PKWY

City CARSON CITY	State NV	Zip Code 89706
---------------------	-------------	-------------------

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

Name of Employer (for Individual) OWNER	Occupation (for Individual) COMSTOCK VILLAGE
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2018

Transaction ID : SA11AI.23616

Amount of Each Receipt this Period
250.00

Memo Item

B. AMERICA FIRST POLICIES, INC.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1400 CRYSTAL DRIVE
SUITE 850

City ARLINGTON	State VA	Zip Code 22202
-------------------	-------------	-------------------

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 ▼
209530.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2018

Transaction ID : SA11AI.23845

Amount of Each Receipt this Period
68244.00

Memo Item
IN-KIND: PAYROLL / OFFICE EXPENSES/ OTHER

C. APOGEE INVESTMENT PARTNERS, LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3060 SW 2ND AVE.

City FORT LAUDERDALE	State FL	Zip Code 33315
-------------------------	-------------	-------------------

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 ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		18		2018

Transaction ID : SA11AI.23848

Amount of Each Receipt this Period
25000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	93494.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 100
	<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)
AMERICA FIRST ACTION, INC.

A. BALCH, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10906 LAKE WINDERMERE DR
 City GREAT FALLS State VA Zip Code 22066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 01 / 2018
Transaction ID : SA11AI.23259
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BAXTER, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8440 CARMEL RIDGE COURT
 City LAS VEGAS State NV Zip Code 89113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APOLLO REALTY Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 22 / 2018
Transaction ID : SA11AI.21109
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BAXTER, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8440 CARMEL RIDGE COURT
 City LAS VEGAS State NV Zip Code 89113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APOLLO REALTY Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 22 / 2018
Transaction ID : SA11AI.23541
 Amount of Each Receipt this Period 100.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 100
	<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)
AMERICA FIRST ACTION, INC.

A. BECKER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1039 ANNA COVES BLVD
 City LAKE ANNA State VA Zip Code 23117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 08 / 2018
Transaction ID : SA11AI.23325
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BELINOWSKI, MARIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 75C BELINOWSKI RD
 City NEW WAVERLY State TX Zip Code 77358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 06 / 2018
Transaction ID : SA11AI.23312
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BERKOWITZ, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26762 WESTHAVEN DRIVE
 City LAGUNA HILLS State CA Zip Code 92653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 14 / 2018
Transaction ID : SA11AI.23610
 Amount of Each Receipt this Period 250.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 100
	(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)
AMERICA FIRST ACTION, INC.

A. CALDERON, ERNESTINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 ROCK HILL CHURCH RD
 City STAFFORD State VA Zip Code 22556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DON Occupation (for Individual) LOG MGMT SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 29 / 2018
Transaction ID : SA11AI.21173
 Amount of Each Receipt this Period 100.00
 Memo Item

B. CALDERON, ERNESTINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 ROCK HILL CHURCH RD
 City STAFFORD State VA Zip Code 22556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DON Occupation (for Individual) LOG MGMT SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 29 / 2018
Transaction ID : SA11AI.23567
 Amount of Each Receipt this Period 100.00
 Memo Item

C. CANINE, RICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10608 EAST 79 ST
 City RAYTOWN State MO Zip Code 64138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARTER-WATERS Occupation (for Individual) TRUCK DRIVER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 30 / 2018
Transaction ID : SA11AI.21221
 Amount of Each Receipt this Period 250.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 100
	<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)
AMERICA FIRST ACTION, INC.

A. CORNISH, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1607 ANNIE PENTON ROAD
 City JAY State FL Zip Code 32565
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.23633
 Amount of Each Receipt this Period 250.00
 Memo Item

B. CRAMER, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2817 S LIPSCOMB
 City AMARILLO State TX Zip Code 79109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AUSTIN HOSE Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 01 / 2018
Transaction ID : SA11AI.23278
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CROCKER-BEDFORD, COLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21173 HWY 141 BOX 8
 City SLICK ROCK State CO Zip Code 81325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 29 / 2018
Transaction ID : SA11AI.23626
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 100		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. CROUCHER, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1037 PARK RD
 City CROWNSVILLE State MD Zip Code 20132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JHU/APL Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 27 / 2018
Transaction ID : SA11AI.23614
 Amount of Each Receipt this Period 250.00
 Memo Item

B. CROWE, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 79405 HWY 111, STE 9-204 STE 9-204
 City LA QUINTA State CA Zip Code 92253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 13 / 2018
Transaction ID : SA11AI.23200
 Amount of Each Receipt this Period 35.00
 Memo Item

C. DORAN, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 753 FARNHAM LANE
 City VIRGINIA BEACH State VA Zip Code 23455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOSEPH DORAN Occupation (for Individual) OTR DRIVER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 258.00

Date of Receipt 06 / 05 / 2018
Transaction ID : SA11AI.21410
 Amount of Each Receipt this Period 3.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	288.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 100
	<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)
AMERICA FIRST ACTION, INC.

A. DORAN, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 753 FARNHAM LANE
 City VIRGINIA BEACH State VA Zip Code 23455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOSEPH DORAN Occupation (for Individual) OTR DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 261.00

Date of Receipt 06 / 29 / 2018
Transaction ID : SA11AI.21924
 Amount of Each Receipt this Period 3.00
 Memo Item

B. DORSCHER, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2057 NW ESTUARY COURT
 City STUART State FL Zip Code 34994
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2018
Transaction ID : SA11AI.21223
 Amount of Each Receipt this Period 250.00
 Memo Item

C. EBERHART, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7131 E RANCHO VISTA DR. 6001
 City SCOTTSDALE State AZ Zip Code 85251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANARY Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 28 / 2018
Transaction ID : SA11AI.23645
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5253.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. ECONOMY, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 843 INVERNESS DR
 City RANCHO MIRAGE State CA Zip Code 92270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STELIAN ONUFREI FOR CONGRESS Occupation (for Individual) COMMUNICATIONS DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 06 / 19 / 2018
Transaction ID : SA11AI.22435
 Amount of Each Receipt this Period 15.00
 Memo Item

B. ECONOMY, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 843 INVERNESS DR
 City RANCHO MIRAGE State CA Zip Code 92270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STELIAN ONUFREI FOR CONGRESS Occupation (for Individual) COMMUNICATIONS DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 21 / 2018
Transaction ID : SA11AI.23007
 Amount of Each Receipt this Period 25.00
 Memo Item

C. ELLIOTT, BEVERLY, BABB, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1477
 City MOUNT JULIET State TN Zip Code 37121
 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 ▼ 5000.00

Date of Receipt 06 / 29 / 2018
Transaction ID : SA11AI.23647
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5040.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. ETEMADI, ALIREZA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2258 FRONT RANGE CT

City ERIE	State CO	Zip Code 80516
--------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2018

Transaction ID : SA11AI.23487

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 520 HARRIER HAWK

City EDMOND	State OK	Zip Code 73003
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2018

Transaction ID : SA11AI.23208

Amount of Each Receipt this Period
35.00

Memo Item

C. FULLER, J, L, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 204 WEST RT 38

City MOORESTOWN	State NJ	Zip Code 08057
--------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) INSURANCE & SECURITIES SALES &
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	08	/	2018

Transaction ID : SA11AI.23446

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	210.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 100
	<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)
AMERICA FIRST ACTION, INC.

A. GLOBAL ENERGY PRODUCERS, LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7670 LA CORNICH CIRCLE

City BOCA RATON	State FL	Zip Code 33433
--------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2018

Transaction ID : SA11AI.21241

Amount of Each Receipt this Period
325000.00

Memo Item

B. GREENSTEIN, IRA, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 103 COUNTRY RIDGE ROAD

City SCARSDALE	State NY	Zip Code 10583
-------------------	-------------	-------------------

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

Name of Employer (for Individual) ENERPULSE TECHNOLOGIES, INC.	Occupation (for Individual) DIRECTOR
---	---

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
06	/	22	/	2018

Transaction ID : SA11AI.23666

Amount of Each Receipt this Period
100000.00

Memo Item

C. GUCCIARDO, CHARLES, S, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 170 OLD COUNTRY RD

City MINEOLA	State NY	Zip Code 11501
-----------------	-------------	-------------------

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

Name of Employer (for Individual) GUCCI LAW	Occupation (for Individual) ATTORNEY
--	---

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
06	/	22	/	2018

Transaction ID : SA11AI.23662

Amount of Each Receipt this Period
50000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	475000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 100
<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)
AMERICA FIRST ACTION, INC.

A. GUNLOCK, BILL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5048 OAK MANOR COURT

City DAYTON	State OH	Zip Code 45429
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2018

Transaction ID : SA11AI.23631

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 1240 HILLVIEW DRIVE

City SARASOTA	State FL	Zip Code 34239
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2018

Transaction ID : SA11AI.23620

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 10 SKYLAND PLACE

City THE WOODLANDS	State TX	Zip Code 77381
-----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		14		2018

Transaction ID : SA11AI.23202

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	535.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. HARRIS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 188 R CHURCH ST
 City NEWTON State MA Zip Code 02458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2018
Transaction ID : SA11AI.21231
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. HAWKINS, GREGG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 SHADOW LAKE DRIVE
 City BUCKHEAD State GA Zip Code 30625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE SILVER MOON Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2018
Transaction ID : SA11AI.23536
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. HICKS, THOMAS, , , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 ROSS AVE, SUITE 5000
 SUITE 5000
 City DALLAS State TX Zip Code 75201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HICKS HOLDINGS LLC Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2018
Transaction ID : SA11AI.23656
 Amount of Each Receipt this Period
 25000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	26100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. HODGE, CHRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2180 IDLEWILD RD

City PALM BEACH GARDENS	State FL	Zip Code 33410
----------------------------	-------------	-------------------

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

Name of Employer (for Individual) THE WAYS BOATYARD	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2018

Transaction ID : SA11AI.23445

Amount of Each Receipt this Period
75.00

Memo Item

B. HODGES, MICHAEL, LYNN, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 OCEANSIDE DR.

City NASHVILLE	State TN	Zip Code 37204
-------------------	-------------	-------------------

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

Name of Employer (for Individual) HARPETH FINANCIAL	Occupation (for Individual) CONSUMER LENDING
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2018

Transaction ID : SA11AI.23672

Amount of Each Receipt this Period
125000.00

Memo Item

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

Mailing Address 100 OCEANSIDE DR.

City NASHVILLE	State TN	Zip Code 37204
-------------------	-------------	-------------------

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

Name of Employer (for Individual) HARPETH FINANCIAL	Occupation (for Individual) CONSUMER LENDING
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
125000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2018

Transaction ID : SA11AI.23852

Amount of Each Receipt this Period
125000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250075.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 100
<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)
AMERICA FIRST ACTION, INC.

A. HOEHN, TRACEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1352 ODENTON RD
 City ODENTON State MD Zip Code 21113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EASTERN EXCAVATING Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 05 / 2018
Transaction ID : SA11AI.23606
 Amount of Each Receipt this Period 250.00
 Memo Item

B. HOFFMAN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13301 MANOR STONE DR
 City DARNESTOWN State MD Zip Code 20874
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXCEL Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 06 / 12 / 2018
Transaction ID : SA11AI.23660
 Amount of Each Receipt this Period 50000.00
 Memo Item

C. HOFFMAN, PAUL, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3465 GREYSTONE COURT
 City COLORADO SPRINGS State CO Zip Code 80906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 13 / 2018
Transaction ID : SA11AI.23201
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	50285.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 100
<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)
AMERICA FIRST ACTION, INC.

A. HOLTON, JOANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3646 CHURCHILL
 City LESLIE State MI Zip Code 49251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMERICA Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 29 / 2018
Transaction ID : SA11AI.23622
 Amount of Each Receipt this Period 250.00
 Memo Item

B. IRION, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7178 GREENSWARD ROAD
 City NEW ALBANY State OH Zip Code 43054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) E-CYCLE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 06 / 29 / 2018
Transaction ID : SA11AI.23664
 Amount of Each Receipt this Period 50000.00
 Memo Item

C. JACK, TYSON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 501
 City SAFFORD State AZ Zip Code 85546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DACON Occupation (for Individual) LINEMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 23 / 2018
Transaction ID : SA11AI.21218
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	50500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 100
	<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)
AMERICA FIRST ACTION, INC.

A. JOYNER, ERNEST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6001 HIDDEN BROOK LANE
 City KNOXVILLE State TN Zip Code 37938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOYNER PROPERTY DEVELOPMENT Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 359.00

Date of Receipt 05 / 31 / 2018
Transaction ID : SA11AI.21224
 Amount of Each Receipt this Period 359.00
 Memo Item

B. KLEINBUB, FREDRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6211 CAMINO DE LA COSTA
 City LA JOLLA State CA Zip Code 92037
 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 05 / 25 / 2018
Transaction ID : SA11AI.21226
 Amount of Each Receipt this Period 500.00
 Memo Item

C. KLENNER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 184
 City CARMICHAEL State CA Zip Code 95609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.23635
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1109.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 100
<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)
AMERICA FIRST ACTION, INC.

A. LANEY, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4111 MANORFIELD

City SEABROOK	State TX	Zip Code 77586
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2018
Transaction ID : SA11AI.23453

Amount of Each Receipt this Period
100.00

Memo Item

B. LEE, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 LA ESCALERA

City SAN ANTONIO	State TX	Zip Code 78261
---------------------	-------------	-------------------

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

Name of Employer (for Individual) QCO LTD	Occupation (for Individual) REAL ESTATE DEVELOPMENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2018
Transaction ID : SA11AI.23624

Amount of Each Receipt this Period
250.00

Memo Item

C. LEE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 MERRIE WAY LANE

City HOUSTON	State TX	Zip Code 77024
-----------------	-------------	-------------------

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

Name of Employer (for Individual) ASCENDANT ADVISORS	Occupation (for Individual) INVESTMENTS
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2018
Transaction ID : SA11AI.23651

Amount of Each Receipt this Period
25000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	25350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. LEE, JOANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11616 WATERSTONE LOOP DR
 City WINDERMERE State FL Zip Code 34786
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 29 / 2018
Transaction ID : SA11AI.23629
 Amount of Each Receipt this Period 250.00
 Memo Item

B. MACKLE, LORETTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 409 JUNO DUNES WAY
 City JUNO BEACH State FL Zip Code 33408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 19 / 2018
Transaction ID : SA11AI.23207
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MARCLEY, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2314 FLORAL WAY
 City SANTA ROSA State CA Zip Code 95403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) RE BROKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 31 / 2018
Transaction ID : SA11AI.21233
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1285.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 100
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MCBRIDE, CINDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25702 NUGGET
 City LAKE FOREST State CA Zip Code 92630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 01 / 2018
Transaction ID : SA11AI.23182
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MCCAFFETY, JUNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 270 ROSENWALL ROAD
 City HUNTSVILLE State TX Zip Code 77320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EPIC HEALTH SERVICES Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 30 / 2018
Transaction ID : SA11AI.21033
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MCCAFFETY, JUNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 270 ROSENWALL ROAD
 City HUNTSVILLE State TX Zip Code 77320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EPIC HEALTH SERVICES Occupation (for Individual) RN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.23438
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 100
<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)
AMERICA FIRST ACTION, INC.

A. MCKEAN, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 ONYX RD.
 City NEW OXFORD State PA Zip Code 17350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NEW AGE ASSOCIATES, INC. BUILDER/DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 10 / 2018
Transaction ID : SA11AI.23608
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. MEDVE, JAKOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3401 LEE PARKWAY, 2203 #2203
 City DALLAS State TX Zip Code 75219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 SELF-EMPLOYED REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2018
Transaction ID : SA11AI.23533
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. MOON, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 SWEETWATER HILLS DR
 City LONGWOOD State FL Zip Code 32779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INVESTOR STRUCTURED FINANCE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2018
Transaction ID : SA11AI.23618
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 100
	<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)
AMERICA FIRST ACTION, INC.

A. MOSKOWITZ, CHERNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4744 NORTH BAY ROAD

City MIAMI BEACH	State FL	Zip Code 33140
---------------------	-------------	-------------------

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

Name of Employer (for Individual) HAWAIIAN GARDENS CASINO	Occupation (for Individual) PRESIDENT
--	--

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
06		08		2018

Transaction ID : SA11AI.23674

Amount of Each Receipt this Period
1000000.00

Memo Item

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

Mailing Address 246 SUITE 100
732 S 11TH ST.

City NILES	State MI	Zip Code 49120
---------------	-------------	-------------------

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

Name of Employer (for Individual) LEONARDO DRS	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2018

Transaction ID : SA11AI.20370

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 246 SUITE 100
732 S 11TH ST.

City NILES	State MI	Zip Code 49120
---------------	-------------	-------------------

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

Name of Employer (for Individual) LEONARDO DRS	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2018

Transaction ID : SA11AI.23378

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 100
	<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)
AMERICA FIRST ACTION, INC.

A. PALMER, GEOFFREY, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 270 N. CANON DRIVE
 City BEVERLY HILLS State CA Zip Code 90210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 G. H. PALMER ASSOCIATES REAL ESTATE DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000000.00

Date of Receipt 06 / 27 / 2018
Transaction ID : SA11AI.23675
 Amount of Each Receipt this Period 2000000.00
 Memo Item

B. PICKARD, TINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 430 PICKARD RD
 City FORT VALLEY State GA Zip Code 31030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 PICKARD SALES CO BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 07 / 2018
Transaction ID : SA11AI.23515
 Amount of Each Receipt this Period 100.00
 Memo Item

C. PLACE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5710 MARILANE ST
 City YAKIMA State WA Zip Code 98908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RETIRED RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 06 / 29 / 2018
Transaction ID : SA11AI.23637
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2000600.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. POLHILL, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5454 N 93RD AVE
 City GLENDALE State AZ Zip Code 85305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPITAL FOODS, LLC Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 05 / 17 / 2018
Transaction ID : SA11AI.21235
 Amount of Each Receipt this Period 20000.00
 Memo Item

B. POLHILL, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5454 N 93RD AVE
 City GLENDALE State AZ Zip Code 85305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPITAL FOODS, LLC Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20050.00

Date of Receipt 06 / 12 / 2018
Transaction ID : SA11AI.23357
 Amount of Each Receipt this Period 50.00
 Memo Item

C. RASTIN, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 243
 City MOUNT VERNON State OH Zip Code 43050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARIEL CORPORATION Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250000.00

Date of Receipt 06 / 26 / 2018
Transaction ID : SA11AI.23670
 Amount of Each Receipt this Period 125000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	145050.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 29 OF 100
	(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)
AMERICA FIRST ACTION, INC.

A. ROBINSON, SYNDEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6844 SILVERTIP CT
 City MAINEVILLE State OH Zip Code 45039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 14 / 2018
Transaction ID : SA11AI.23368
 Amount of Each Receipt this Period 50.00
 Memo Item

B. ROESSL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1881 SW 52ND TER
 City PLANTATION State FL Zip Code 33317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 29 / 2018
Transaction ID : SA11AI.23587
 Amount of Each Receipt this Period 100.00
 Memo Item

C. RUSSELL, THOMAS, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12607 S. 12TH STREET
 City JENKS State OK Zip Code 74037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250000.00

Date of Receipt 05 / 22 / 2018
Transaction ID : SA11AI.21237
 Amount of Each Receipt this Period 250000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 30 OF 100
<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)
AMERICA FIRST ACTION, INC.

A. SEARLE, GIDEON, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 316 NEAPOLITAN WAY
 City NAPLES State FL Zip Code 34103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2018
Transaction ID : SA11AI.23639
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. SHAPIRO, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 71 RED OAK LN.
 City HIGHLAND PARK State IL Zip Code 60035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2018
Transaction ID : SA11AI.23653
 Amount of Each Receipt this Period
 25000.00
 Memo Item

C. SIMON, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 641 ST. JAMES RD
 City NEWPORT BEACH State CA Zip Code 92663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) JOURNALIST
 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
 06 / 09 / 2018
Transaction ID : SA11AI.23658
 Amount of Each Receipt this Period
 50000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	76000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 OF 100
<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)
AMERICA FIRST ACTION, INC.

A. SINQUEFIELD, REX, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 244 BENT WALNUT LN
 City WESTPHALIA State MO Zip Code 65085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 06 / 29 / 2018
Transaction ID : SA11AI.23668
 Amount of Each Receipt this Period 100000.00
 Memo Item

B. SPARKS, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 183 HIGHLAND AVE.
 City SOUTH PORTLAND State ME Zip Code 04106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) WEB DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 06 / 2018
Transaction ID : SA11AI.23512
 Amount of Each Receipt this Period 100.00
 Memo Item

C. SZUSTER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 STATION ROAD
 City GREAT NECK State NY Zip Code 11023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVID SZUSTER PSYCHIATRY PC Occupation (for Individual) MD
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2018
Transaction ID : SA11AI.23197
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	100135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 100
	<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)
AMERICA FIRST ACTION, INC.

A. TAYLOR, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1030 CAROLINA BLVD.
 P. O. BOX 3405
 City TOPSAIL BEACH State NC Zip Code 28445
 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 ▼ 5000.00

Date of Receipt 06 / 28 / 2018
Transaction ID : SA11AI.23643
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. TOZZI, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4741
 City JACKSON State WY Zip Code 83001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAMBRIDGE INVESTMENTS Occupation (for Individual) INVESTMENT ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 22 / 2018
Transaction ID : SA11AI.21216
 Amount of Each Receipt this Period 250.00
 Memo Item

C. VANDER LEESE, ARLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 2ND ST
 City SULLY State IA Zip Code 50251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SULLY TRANSPORT Occupation (for Individual) TRANSPORTATION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 31 / 2018
Transaction ID : SA11AI.21229
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	5750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. WARRIX, LORA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4500 FRANKLIN PIKE
 City NASHVILLE State TN Zip Code 37204
 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 ▼ 2500.00

Date of Receipt 05 / 28 / 2018
Transaction ID : SA11AI.21227
 Amount of Each Receipt this Period 500.00
 Memo Item

B. WARRIX, LORA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4500 FRANKLIN PIKE
 City NASHVILLE State TN Zip Code 37204
 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 06 / 28 / 2018
Transaction ID : SA11AI.23636
 Amount of Each Receipt this Period 500.00
 Memo Item

C. WATTS, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3403 VELASCO CT.
 City MISSOURI CITY State TX Zip Code 77459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRUE VINES, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 29 / 2018
Transaction ID : SA11AI.20948
 Amount of Each Receipt this Period 50.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. WATTS, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3403 VELASCO CT.
 City MISSOURI CITY State TX Zip Code 77459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRUE VINES, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 29 / 2018
Transaction ID : SA11AI.23384
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WEIR, SANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2852 CENTRAL PARK WAY N.E. APT#104
 City GRAND RAPIDS State MI Zip Code 49505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 11 / 2018
Transaction ID : SA11AI.23641
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. WHEATLAND TUBE, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 227 W. MONROE STREET SUITE 2600
 City CHICAGO State IL Zip Code 60606
 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 ▼ 1250000.00

Date of Receipt 06 / 04 / 2018
Transaction ID : SA11AI.21239
 Amount of Each Receipt this Period 250000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	251050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. WHITE, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 PENN PLAZA

City NEW YORK	State NY	Zip Code 10119
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	19	/	2018

Transaction ID : SA11AI.23655

Amount of Each Receipt this Period
25000.00

Memo Item

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

Mailing Address 50 NORMANDIE TERRACE

City SAN FRANCISCO	State CA	Zip Code 94115
-----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2018

Transaction ID : SA11AI.21219

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 221 MOWERY RD NW

City CLEVELAND	State TN	Zip Code 37312
-------------------	-------------	-------------------

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

Name of Employer (for Individual) CBRE	Occupation (for Individual) COMMERCIAL RE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	01	/	2018

Transaction ID : SA11AI.23604

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	25500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 100
	<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)
AMERICA FIRST ACTION, INC.

A. WONDERS, BILLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2506 OVERCREEK DR
 City RICHARDSON State TX Zip Code 75080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 01 / 2018
Transaction ID : SA11AI.23602
 Amount of Each Receipt this Period 250.00
 Memo Item

B. WRIGHT, KAREN, BUCHWALD, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 243
 City MOUNT VERNON State OH Zip Code 43050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARIEL CORPORATION Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250000.00

Date of Receipt 06 / 26 / 2018
Transaction ID : SA11AI.23669
 Amount of Each Receipt this Period 125000.00
 Memo Item

C. WUTKE, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6666 ODANA RD STE 215
 City MADISON State WI Zip Code 53719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 19 / 2018
Transaction ID : SA11AI.23612
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WUTKE, MARY, , ,

Mailing Address 6666 ODANA RD
STE 215

City MADISON State WI Zip Code 53719

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2018

Transaction ID : SA11AI.23627

Amount of Each Receipt this Period
250.00

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
MM / DD / YYYY

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
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	4967994.00

**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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.19876
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.19877
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.19878
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES 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 D / Y Y Y Y Y Y
05 / 31 / 2018

FEC Identification Number

C
Transaction ID : SB21B.19879
Amount of Each Disbursement this Period
 656.80

Memo Item

Full Name (Last, First, Middle Initial)

B. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES 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 D / Y Y Y Y Y Y
05 / 31 / 2018

FEC Identification Number

C
Transaction ID : SB21B.19880
Amount of Each Disbursement this Period
 11150.54

Memo Item

Full Name (Last, First, Middle Initial)

C. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES 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 D / Y Y Y Y Y Y
06 / 11 / 2018

FEC Identification Number

C
Transaction ID : SB21B.19904
Amount of Each Disbursement this Period
 12047.08

Memo Item

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

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

23854.42

**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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.19905
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.19906
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.19907
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

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 / D D / Y Y Y Y Y Y
06 / 21 / 2018

FEC Identification Number

C
Transaction ID : SB21B.19908
Amount of Each Disbursement this Period
 7943.16

Memo Item

Full Name (Last, First, Middle Initial)

B. 4IMPRINT

Mailing Address **101 COMMERCE STREET**

City **OSHKOSH** State **WI** Zip Code **54901**

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.19904]: DONOR COLLATERAL

Candidate Name

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 04 / 2018

FEC Identification Number

C
Transaction ID : SB21B.23794
Amount of Each Disbursement this Period
 1598.46

Memo Item

Full Name (Last, First, Middle Initial)

C. ADVANTAGE DIRECT

Mailing Address **2300 CLARENDON BOULEVARD
SUITE 303**

City **ARLINGTON** State **VA** Zip Code **22201**

Purpose of Disbursement
POLLING EXPENSE

Candidate Name

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 29 / 2018

FEC Identification Number

C
Transaction ID : SB21B.19905
Amount of Each Disbursement this Period
 239.33

Memo Item

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

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

8182.49

**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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. ALASKA AIRLINES		Date of Disbursement MM / DD / YYYY 05 / 17 / 2018
Mailing Address 19300 INTERNATIONAL BLVD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23763 Amount of Each Disbursement this Period 498.20
City SEATTLE	State WA	Zip Code 98188
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19878]: TRAVEL: AIR		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ALASKA AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 06 / 2018
Mailing Address 19300 INTERNATIONAL BLVD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23730 Amount of Each Disbursement this Period 284.80
City SEATTLE	State WA	Zip Code 98188
Purpose of Disbursement REIMBURSEMENT [SB21B.19948]: TRAVEL: AIR		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. AMERICA FIRST POLICIES, INC.		Date of Disbursement MM / DD / YYYY 06 / 30 / 2018
Mailing Address 1400 CRYSTAL DRIVE SUITE 850		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23847 Amount of Each Disbursement this Period 68244.00
City ARLINGTON	State VA	Zip Code 22202
Purpose of Disbursement IN-KIND: PAYROLL / OFFICE EXPENSES/ OTHER		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	

SUBTOTAL of Disbursements This Page (optional).....▶	68244.00
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)
AMERICA FIRST ACTION, INC.

A. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)
Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement REIMBURSEMENT [SB21B.19900]: TRAVEL: AIR

Candidate Name

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

State: District:

Date of Disbursement: 03 / 12 / 2018

FEC Identification Number: C

Transaction ID : SB21B.23680

Amount of Each Disbursement this Period: 730.59

Memo Item

B. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)
Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement REIMBURSEMENT [SB21B.19899]: TRAVEL: AIR

Candidate Name

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

State: District:

Date of Disbursement: 03 / 27 / 2018

FEC Identification Number: C

Transaction ID : SB21B.23676

Amount of Each Disbursement this Period: 516.88

Memo Item

C. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)
Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement REIMBURSEMENT [SB21B.19910]: TRAVEL: AIR

Candidate Name

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

State: District:

Date of Disbursement: 05 / 04 / 2018

FEC Identification Number: C

Transaction ID : SB21B.23703

Amount of Each Disbursement this Period: 80.00

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 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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 05 / 10 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB21B.23758 Amount of Each Disbursement this Period [] 477.20
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19878]: TRAVEL: AIR		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 05 / 17 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB21B.23692 Amount of Each Disbursement this Period [] 350.20
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement REIMBURSEMENT [SB21B.19910]: TRAVEL: AIR		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 05 / 18 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB21B.23767 Amount of Each Disbursement this Period [] 441.30
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19878]: TRAVEL: AIR		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 0.00
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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 05 / 21 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB21B.23770 Amount of Each Disbursement this Period [] 281.80
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19878]: TRAVEL: AIR		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 05 / 21 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB21B.23771 Amount of Each Disbursement this Period [] 281.80
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19878]: TRAVEL: AIR		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 05 / 25 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB21B.23771 Amount of Each Disbursement this Period [] 477.20
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19879]: TRAVEL: AIR		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 0.00
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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 04 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB21B.23802 Amount of Each Disbursement this Period [] 477.20
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19905]: TRAVEL: AIR		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: [] District: []	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 07 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB21B.23731 Amount of Each Disbursement this Period [] 140.20
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement REIMBURSEMENT [SB21B.19948]: TRAVEL: AIR		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: [] District: []	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 07 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB21B.23732 Amount of Each Disbursement this Period [] 200.00
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement REIMBURSEMENT [SB21B.19948]: TRAVEL: AIR		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: [] District: []	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 0.00
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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 14 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB21B.23809 Amount of Each Disbursement this Period [] 926.40
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19905]: TRAVEL: AIR		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 18 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB21B.23830 Amount of Each Disbursement this Period [] 1030.41
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19907]: TRAVEL: AIR		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 18 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB21B.23831 Amount of Each Disbursement this Period [] 1030.41
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19907]: TRAVEL: AIR		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

[] 0.00

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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. AMERICA TRANSPORTATION

Mailing Address 6930 GIRARD STREET

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.19908]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/Type

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

Date of Disbursement
MM / DD / YYYY
06 / 19 / 2018

FEC Identification Number
C
Transaction ID : SB21B.23844
Amount of Each Disbursement this Period
623.70

Memo Item

Full Name (Last, First, Middle Initial)

B. AMTRAK

Mailing Address 60 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
REIMBURSEMENT [SB21B.19910]: TRAVEL: RAIL
Candidate Name

Category/Type

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

Date of Disbursement
MM / DD / YYYY
05 / 03 / 2018

FEC Identification Number
C
Transaction ID : SB21B.23705
Amount of Each Disbursement this Period
17.00

Memo Item

Full Name (Last, First, Middle Initial)

C. AMTRAK

Mailing Address 60 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
REIMBURSEMENT [SB21B.19913]: TRAVEL: RAIL
Candidate Name

Category/Type

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

Date of Disbursement
MM / DD / YYYY
05 / 10 / 2018

FEC Identification Number
C
Transaction ID : SB21B.23708
Amount of Each Disbursement this Period
222.00

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 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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. BLT PRIME

Mailing Address 1100 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.19880]: MEETING EXPENSE

Candidate Name

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

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.23778
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. BLT PRIME

Mailing Address 1100 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.19904]: MEETING EXPENSE

Candidate Name

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

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.23796
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. BLT PRIME

Mailing Address 1100 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.19906]: MEETING EXPENSE

Candidate Name

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

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.23817
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. BLT PRIME

Mailing Address 1100 PENNSYLVANIA AVE NW

City
WASHINGTON

State
DC

Zip Code
20004

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.19907]: MEETING EXPENSE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 18 / 2018

FEC Identification Number

C
Transaction ID : SB21B.23829
Amount of Each Disbursement this Period
97.40

Memo Item

Full Name (Last, First, Middle Initial)

B. BLT PRIME

Mailing Address 1100 PENNSYLVANIA AVE NW

City
WASHINGTON

State
DC

Zip Code
20004

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.19908]: MEETING EXPENSE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 19 / 2018

FEC Identification Number

C
Transaction ID : SB21B.23836
Amount of Each Disbursement this Period
126.92

Memo Item

Full Name (Last, First, Middle Initial)

C. BLT PRIME

Mailing Address 1100 PENNSYLVANIA AVE NW

City
WASHINGTON

State
DC

Zip Code
20004

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.19908]: MEETING EXPENSE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 19 / 2018

FEC Identification Number

C
Transaction ID : SB21B.2384t
Amount of Each Disbursement this Period
256.48

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 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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. BOOKS-A-MILLION		Date of Disbursement MM / DD / YYYY 06 / 07 / 2018
Mailing Address 3962 AIRPORT BLVD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23799 Amount of Each Disbursement this Period 9248.00
City MOBILE	State AL	Zip Code 36608
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19904]: DONOR COLLATERAL		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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. CAPITAL RESEARCH GROUP, LLC		Date of Disbursement MM / DD / YYYY 06 / 29 / 2018
Mailing Address 1101 K STREET, NW SUITE 800 NW SUITE 800		FEC Identification Number C [REDACTED] Transaction ID : SB21B.19911 Amount of Each Disbursement this Period 7500.00
City WASHINGTON	State DC	Zip Code 20005
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) C. CF HEADWEAR		Date of Disbursement MM / DD / YYYY 06 / 15 / 2018
Mailing Address 20934 S SANTA FE AVE.		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23811 Amount of Each Disbursement this Period 2775.77
City CARSON	State CA	Zip Code 90810
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19906]: DONOR COLLATERAL: LANYARDS		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 checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	7500.00
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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. COURTYARD BY MARRIOTT

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	1	8

Mailing Address 8900 BARTRAM AVE

City PHILADELPHIA State PA Zip Code 19153

Purpose of Disbursement REIMBURSEMENT [SB21B.19910]: TRAVEL: LODGING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

FEC Identification Number

C []
Transaction ID : SB21B.23702
Amount of Each Disbursement this Period
[] 261.27

Memo Item

Full Name (Last, First, Middle Initial)

B. DAC ENTERPRISES LLC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	1	8

Mailing Address 10319 WESTLAKE DR #186

City BETHESDA State MD Zip Code 20817

Purpose of Disbursement COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

FEC Identification Number

C []
Transaction ID : SB21B.19881
Amount of Each Disbursement this Period
[] 7500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DAC ENTERPRISES LLC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	1	8

Mailing Address 10319 WESTLAKE DR #186

City BETHESDA State MD Zip Code 20817

Purpose of Disbursement COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

FEC Identification Number

C []
Transaction ID : SB21B.19914
Amount of Each Disbursement this Period
[] 7500.00

Memo Item

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

[] 15000.00

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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 05 / 15 / 2018
Mailing Address 1030 DELTA BLVD		FEC Identification Number C [] Transaction ID : SB21B.23713 Amount of Each Disbursement this Period [] 892.70
City ATLANTA	State GA	Zip Code 30354
Purpose of Disbursement REIMBURSEMENT [SB21B.19913]: TRAVEL: AIR		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 05 / 18 / 2018
Mailing Address 1030 DELTA BLVD		FEC Identification Number C [] Transaction ID : SB21B.23690 Amount of Each Disbursement this Period [] 353.20
City ATLANTA	State GA	Zip Code 30354
Purpose of Disbursement REIMBURSEMENT [SB21B.19910]: TRAVEL: AIR		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 05 / 21 / 2018
Mailing Address 1030 DELTA BLVD		FEC Identification Number C [] Transaction ID : SB21B.2376t Amount of Each Disbursement this Period [] 910.20
City ATLANTA	State GA	Zip Code 30354
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19878]: TRAVEL: AIR		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 0.00
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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. EDGE FLORAL EVENT DESIGN		Date of Disbursement MM / DD / YYYY 06 / 19 / 2018
Mailing Address 8517 MUSCATELLO CT		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23841 Amount of Each Disbursement this Period 4225.00
City GAITHERSBURG	State MD	Zip Code 20877
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19908]: EVENT STAGING EXPENSE		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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. EVENT STRATEGIES, INC		Date of Disbursement MM / DD / YYYY 06 / 11 / 2018
Mailing Address 4416 WHEELER AVE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.19916 Amount of Each Disbursement this Period 89850.00
City ALEXANDRIA	State VA	Zip Code 22304
Purpose of Disbursement EVENT EXPENSE: FACILITY RENTAL AND CATERING		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) C. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 05 / 08 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23733 Amount of Each Disbursement this Period 58.26
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19876]: DELIVERY EXPENSE		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 checked="" type="checkbox"/> Memo Item	

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

89850.00

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 05 / 09 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23736 Amount of Each Disbursement this Period [REDACTED] 682.95
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19876]: DELIVERY EXPENSE		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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 05 / 10 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23737 Amount of Each Disbursement this Period [REDACTED] 321.15
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19876]: DELIVERY EXPENSE		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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 05 / 11 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23744 Amount of Each Disbursement this Period [REDACTED] 53.16
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19876]: DELIVERY EXPENSE		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 checked="" type="checkbox"/> Memo Item	

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

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

0.00
[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 05 / 14 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23745 Amount of Each Disbursement this Period [REDACTED] 1007.10
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19876]: DELIVERY EXPENSE		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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 05 / 15 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23746 Amount of Each Disbursement this Period [REDACTED] 14.95
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19876]: DELIVERY EXPENSE		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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 05 / 16 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23747 Amount of Each Disbursement this Period [REDACTED] 511.97
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19876]: DELIVERY EXPENSE		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 checked="" type="checkbox"/> Memo Item	

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

[REDACTED] 0.00

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 05 / 17 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23748 Amount of Each Disbursement this Period [REDACTED] 57.61
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19876]: DELIVERY EXPENSE		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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 05 / 18 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23751 Amount of Each Disbursement this Period [REDACTED] 32.47
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19876]: DELIVERY EXPENSE		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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 05 / 21 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23756 Amount of Each Disbursement this Period [REDACTED] 167.55
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19877]: DELIVERY EXPENSE		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 checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 0.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 05 / 23 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [] Transaction ID : SB21B.23757 Amount of Each Disbursement this Period [] 69.58
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19877]: DELIVERY EXPENSE		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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 05 / 24 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [] Transaction ID : SB21B.23777 Amount of Each Disbursement this Period [] 19.80
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19880]: DELIVERY EXPENSE		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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 05 / 29 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [] Transaction ID : SB21B.23784 Amount of Each Disbursement this Period [] 36.20
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19880]: DELIVERY EXPENSE		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 checked="" type="checkbox"/> Memo Item	

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

[] 0.00

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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. FEDERAL EXPRESS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	1	8

Mailing Address 461 WINCHESTER RD

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.23789
Amount of Each Disbursement this Period

[REDACTED] 111.16

Memo Item

City MEMPHIS State TN Zip Code 38109

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.19904]: DELIVERY EXPENSE

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. FEDERAL EXPRESS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	1	8

Mailing Address 461 WINCHESTER RD

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.23790
Amount of Each Disbursement this Period

[REDACTED] 14.65

Memo Item

City MEMPHIS State TN Zip Code 38109

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.19904]: DELIVERY EXPENSE

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. FEDERAL EXPRESS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	8

Mailing Address 461 WINCHESTER RD

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.23791
Amount of Each Disbursement this Period

[REDACTED] 15.60

Memo Item

City MEMPHIS State TN Zip Code 38109

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.19904]: DELIVERY EXPENSE

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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

[REDACTED] 0.00

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 06 / 04 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [] Transaction ID : SB21B.23795 Amount of Each Disbursement this Period [] 84.10
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19904]: DELIVERY EXPENSE		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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 06 / 07 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [] Transaction ID : SB21B.23797 Amount of Each Disbursement this Period [] 9.90
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19904]: DELIVERY EXPENSE		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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 06 / 11 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [] Transaction ID : SB21B.2381C Amount of Each Disbursement this Period [] 18.50
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19906]: DELIVERY EXPENSE		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 checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 0.00
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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 06 / 12 / 2018	
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23813 Amount of Each Disbursement this Period [REDACTED] 285.63	
City MEMPHIS	State TN	Zip Code 38109	Category/ Type
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19906]: DELIVERY EXPENSE			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 06 / 14 / 2018	
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23816 Amount of Each Disbursement this Period [REDACTED] 30.01	
City MEMPHIS	State TN	Zip Code 38109	Category/ Type
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19906]: DELIVERY EXPENSE			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 06 / 19 / 2018	
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23835 Amount of Each Disbursement this Period [REDACTED] 1293.75	
City MEMPHIS	State TN	Zip Code 38109	Category/ Type
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19908]: DELIVERY EXPENSE			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 0.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. FIG & OLIVE		Date of Disbursement MM / DD / YYYY 05 / 11 / 2018
Mailing Address 808 LEXINGTON AVE.		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23743 Amount of Each Disbursement this Period [REDACTED] 646.72
City NEW YORK	State NY	Zip Code 10065
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19876]: TRAVEL: MEALS		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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. HICKS, THOMAS, , , JR.		Date of Disbursement MM / DD / YYYY 05 / 18 / 2018
Mailing Address 2200 ROSS AVE, SUITE 5000 SUITE 5000		FEC Identification Number C [REDACTED] Transaction ID : SB21B.19899 Amount of Each Disbursement this Period [REDACTED] 899.94
City DALLAS	State TX	Zip Code 75201
Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED		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) C. HICKS, THOMAS, , , JR.		Date of Disbursement MM / DD / YYYY 05 / 18 / 2018
Mailing Address 2200 ROSS AVE, SUITE 5000 SUITE 5000		FEC Identification Number C [REDACTED] Transaction ID : SB21B.1990c Amount of Each Disbursement this Period [REDACTED] 1254.47
City DALLAS	State TX	Zip Code 75201
Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED		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] 2154.41
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. HICKS, THOMAS, , , JR.

Full Name (Last, First, Middle Initial)

Mailing Address 2200 ROSS AVE, SUITE 5000
SUITE 5000

City DALLAS State TX Zip Code 75201

Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement MM / DD / YYYY: 06 / 22 / 2018

FEC Identification Number C

Transaction ID : SB21B.19948

Amount of Each Disbursement this Period 625.00

Memo Item

B. HIGBIE, CARL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 70 OLD STONE BRIDGE RD

City COS COB State CT Zip Code 06807

Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement MM / DD / YYYY: 06 / 11 / 2018

FEC Identification Number C

Transaction ID : SB21B.19913

Amount of Each Disbursement this Period 3517.80

Memo Item

C. HILTON ATLANTA

Full Name (Last, First, Middle Initial)

Mailing Address 255 COURTLAND ST NE

City ATLANTA State GA Zip Code 30303

Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19880]: TRAVEL: LODGING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement MM / DD / YYYY: 05 / 24 / 2018

FEC Identification Number C

Transaction ID : SB21B.23776

Amount of Each Disbursement this Period 1033.47

Memo Item

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

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

4142.80

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. HOTELS.COM

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		14		2018

Mailing Address 10440 NORTH CENTRAL EXPRESSWAY
SUITE 400

City DALLAS State TX Zip Code 75231

Purpose of Disbursement REIMBURSEMENT [SB21B.19913]: TRAVEL: LODGING

Candidate Name

Category/Type

FEC Identification Number

C

Transaction ID : SB21B.23711

Amount of Each Disbursement this Period

1623.82

Memo Item

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

Full Name (Last, First, Middle Initial)

B. JENNI BICK BOOKBINDING

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		17		2018

Mailing Address 12 COURNOYER RD.

City VINEYARD HAVEN State MA Zip Code 02568

Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19876]: DONOR COLLATERAL

Candidate Name

Category/Type

FEC Identification Number

C

Transaction ID : SB21B.23787

Amount of Each Disbursement this Period

4977.50

Memo Item

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

Full Name (Last, First, Middle Initial)

C. JONES DAY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		22		2018

Mailing Address PO BOX 7805
BEN FRANKLIN STATION

City WASHINGTON State DC Zip Code 20044

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Category/Type

FEC Identification Number

C

Transaction ID : SB21B.19917

Amount of Each Disbursement this Period

14000.00

Memo Item

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

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

14000.00

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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. LAZ PARKING

Mailing Address 1700 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.19876]: TRAVEL: PARKING

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2018

FEC Identification Number

C
Transaction ID : SB21B.23740
Amount of Each Disbursement this Period
26.00

Memo Item

Full Name (Last, First, Middle Initial)

B. LAZ PARKING

Mailing Address 1700 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.19908]: TRAVEL: PARKING

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 19 / 2018

FEC Identification Number

C
Transaction ID : SB21B.23835
Amount of Each Disbursement this Period
35.00

Memo Item

Full Name (Last, First, Middle Initial)

C. LOEWS REGENCY NEW YORK

Mailing Address 540 PARK AVE

City NEW YORK State NY Zip Code 10065

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.19876]: TRAVEL: LODGING

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2018

FEC Identification Number

C
Transaction ID : SB21B.2375t
Amount of Each Disbursement this Period
1050.00

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 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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. LOEWS REGENCY NEW YORK

Mailing Address 540 PARK AVE

City NEW YORK State NY Zip Code 10065

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.19904]: TRAVEL: LODGING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
06 / 04 / 2018

FEC Identification Number

C
Transaction ID : SB21B.23792
Amount of Each Disbursement this Period
168.79

Memo Item

Full Name (Last, First, Middle Initial)

B. MARRIOTT

Mailing Address 160 CENTRAL PARK S

City NEW YORK State NY Zip Code 10019

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.19878]: TRAVEL: LODGING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2018

FEC Identification Number

C
Transaction ID : SB21B.23761
Amount of Each Disbursement this Period
983.46

Memo Item

Full Name (Last, First, Middle Initial)

C. MARRIOTT

Mailing Address 160 CENTRAL PARK S

City NEW YORK State NY Zip Code 10019

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.19878]: TRAVEL: LODGING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2018

FEC Identification Number

C
Transaction ID : SB21B.23762
Amount of Each Disbursement this Period
983.46

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 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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. MARRIOTT		Date of Disbursement MM / DD / YYYY 05 / 18 / 2018
Mailing Address 160 CENTRAL PARK S		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23766 Amount of Each Disbursement this Period [REDACTED] - 983.46
City NEW YORK	State NY	Zip Code 10019
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19878]: 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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. MARRIOTT		Date of Disbursement MM / DD / YYYY 05 / 21 / 2018
Mailing Address 160 CENTRAL PARK S		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23769 Amount of Each Disbursement this Period [REDACTED] 74.22
City NEW YORK	State NY	Zip Code 10019
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19878]: 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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. MARRIOTT HOTEL		Date of Disbursement MM / DD / YYYY 05 / 05 / 2018
Mailing Address 4200 GEORGE J BEAN PARKWAY		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23698 Amount of Each Disbursement this Period [REDACTED] 357.28
City TAMPA	State FL	Zip Code 33607
Purpose of Disbursement REIMBURSEMENT [SB21B.19910]: 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 checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 0.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. MASON STRATEGIES LLC		Date of Disbursement MM / DD / YYYY 05 / 22 / 2018
Mailing Address 611 PENNSYLVANIA AVE SE # 385		FEC Identification Number C [] Transaction ID : SB21B.19882 Amount of Each Disbursement this Period 10000.00
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. MASON STRATEGIES LLC		Date of Disbursement MM / DD / YYYY 06 / 22 / 2018
Mailing Address 611 PENNSYLVANIA AVE SE # 385		FEC Identification Number C [] Transaction ID : SB21B.19918 Amount of Each Disbursement this Period 10000.00
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) C. MCLAUGHLIN & ASSOCIATES, INC.		Date of Disbursement MM / DD / YYYY 06 / 28 / 2018
Mailing Address 566 S. ROUTE 303		FEC Identification Number C [] Transaction ID : SB21B.19915 Amount of Each Disbursement this Period 15200.00
City BLAUVELT	State NY	Zip Code 10913
Purpose of Disbursement POLLING EXPENSE		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	

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

35200.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. MERCHOLOGY

Mailing Address 121 CHESHIRE LANE N. STE 100

City MINNEAPOLIS State MN Zip Code 55305

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.19880]: DONOR COLLATERAL

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 25 / 2018

FEC Identification Number

C
Transaction ID : SB21B.23779
Amount of Each Disbursement this Period
8248.38

Memo Item

Full Name (Last, First, Middle Initial)

B. MORTON'S THE STEAKHOUSE

Mailing Address 551 5TH AVE.

City NEW YORK State NY Zip Code 10017

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.19876]: MEETING EXPENSE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2018

FEC Identification Number

C
Transaction ID : SB21B.23753
Amount of Each Disbursement this Period
1757.38

Memo Item

Full Name (Last, First, Middle Initial)

C. MO STRATEGIES INC

Mailing Address P.O. BOX 4

City WESTFIELD State IN Zip Code 46074

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 22 / 2018

FEC Identification Number

C
Transaction ID : SB21B.19883
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 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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. MO STRATEGIES INC		Date of Disbursement MM / DD / YYYY 06 / 22 / 2018
Mailing Address P.O. BOX 4		FEC Identification Number C [] Transaction ID : SB21B.19920 Amount of Each Disbursement this Period 10000.00
City WESTFIELD	State IN	Zip Code 46074
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. PIN DEPOT		Date of Disbursement MM / DD / YYYY 05 / 21 / 2018
Mailing Address 2200 WINTER SPRINGS BLVD SUITE 106-322		FEC Identification Number C [] Transaction ID : SB21B.23755 Amount of Each Disbursement this Period 2754.00
City OVIEDO	State FL	Zip Code 32765
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19877]: DONOR COLLATERAL		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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. QUEEN CITY CLUB		Date of Disbursement MM / DD / YYYY 06 / 07 / 2018
Mailing Address 331 E 4TH ST		FEC Identification Number C [] Transaction ID : SB21B.23801 Amount of Each Disbursement this Period 652.62
City CONCINNATI	State OH	Zip Code 45202
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19904]: EVENT EXPENSE		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 checked="" type="checkbox"/> Memo Item	

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

10000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. RED MAVERICK MEDIA LLC		Date of Disbursement MM / DD / YYYY 06 / 21 / 2018
Mailing Address 403 N. SECOND STREET FL2		FEC Identification Number C [] Transaction ID : SB21B.19922 Amount of Each Disbursement this Period 1639.35
City HARRISBURG	State PA	Zip Code 17101
Purpose of Disbursement COLLATERAL MATERIALS - LANYARDS		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. RED STATE DATA AND DIGITAL		Date of Disbursement MM / DD / YYYY 06 / 01 / 2018
Mailing Address 611 PENNSYLVANIA AVE SE #454		FEC Identification Number C [] Transaction ID : SB21B.19923 Amount of Each Disbursement this Period 10000.00
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) C. RED STATE DATA AND DIGITAL		Date of Disbursement MM / DD / YYYY 06 / 28 / 2018
Mailing Address 611 PENNSYLVANIA AVE SE #454		FEC Identification Number C [] Transaction ID : SB21B.19924 Amount of Each Disbursement this Period 6540.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement WEB DESIGN AND DEVELOPMENT		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	

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

18179.35

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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. ST. JAMES STRATEGIES		Date of Disbursement MM / DD / YYYY 05 / 18 / 2018
Mailing Address 45 NORTH HILL DRIVE SUITE 100		FEC Identification Number C [] Transaction ID : SB21B.19885 Amount of Each Disbursement this Period 5000.00
City WARRENTON	State VA	Zip Code 20186
Purpose of Disbursement STRATEGY 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. ST. JAMES STRATEGIES		Date of Disbursement MM / DD / YYYY 06 / 04 / 2018
Mailing Address 45 NORTH HILL DRIVE SUITE 100		FEC Identification Number C [] Transaction ID : SB21B.19925 Amount of Each Disbursement this Period 5000.00
City WARRENTON	State VA	Zip Code 20186
Purpose of Disbursement STRATEGY 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) C. STRIPE		Date of Disbursement MM / DD / YYYY 05 / 17 / 2018
Mailing Address 3180 18TH STREET		FEC Identification Number C [] Transaction ID : SB21B.19886 Amount of Each Disbursement this Period 18.37
City SAN FRANCISCO	State CA	Zip Code 94110
Purpose of Disbursement MERCHANT 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	

SUBTOTAL of Disbursements This Page (optional).....▶	10018.37
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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.19887

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.19888

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.19888

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.19890
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.19891
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.19892
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.19893
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.19894
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.19895
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2018

FEC Identification Number

C
Transaction ID : SB21B.19926
Amount of Each Disbursement this Period
120.37

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 04 / 2018

FEC Identification Number

C
Transaction ID : SB21B.19927
Amount of Each Disbursement this Period
241.02

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 05 / 2018

FEC Identification Number

C
Transaction ID : SB21B.19928
Amount of Each Disbursement this Period
172.64

Memo Item

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

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

534.03

**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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 06 / 2018

FEC Identification Number

C []

Transaction ID : SB21B.19929

Amount of Each Disbursement this Period

[] 20.75

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2018

FEC Identification Number

C []

Transaction ID : SB21B.19930

Amount of Each Disbursement this Period

[] 195.36

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 08 / 2018

FEC Identification Number

C []

Transaction ID : SB21B.19931

Amount of Each Disbursement this Period

[] 150.93

Memo Item

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

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

[] 367.04

[]

**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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 11 / 2018

FEC Identification Number

C

Transaction ID : SB21B.19932

Amount of Each Disbursement this Period

36.72

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 12 / 2018

FEC Identification Number

C

Transaction ID : SB21B.19933

Amount of Each Disbursement this Period

73.79

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 13 / 2018

FEC Identification Number

C

Transaction ID : SB21B.19934

Amount of Each Disbursement this Period

2210.35

Memo Item

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

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

2320.86

**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 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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 14 / 2018

FEC Identification Number

C
Transaction ID : SB21B.19935
Amount of Each Disbursement this Period
1509.23

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 15 / 2018

FEC Identification Number

C
Transaction ID : SB21B.19936
Amount of Each Disbursement this Period
21.92

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 18 / 2018

FEC Identification Number

C
Transaction ID : SB21B.19937
Amount of Each Disbursement this Period
44.84

Memo Item

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

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

1575.99

**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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 19 / 2018

FEC Identification Number

C
Transaction ID : SB21B.19938
Amount of Each Disbursement this Period
18.12

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 20 / 2018

FEC Identification Number

C
Transaction ID : SB21B.19939
Amount of Each Disbursement this Period
739.79

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 21 / 2018

FEC Identification Number

C
Transaction ID : SB21B.1994t
Amount of Each Disbursement this Period
1029.81

Memo Item

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

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

1787.72

**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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 22 / 2018

FEC Identification Number

C
Transaction ID : SB21B.19941
Amount of Each Disbursement this Period
10.84

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 25 / 2018

FEC Identification Number

C
Transaction ID : SB21B.19942
Amount of Each Disbursement this Period
4.50

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 26 / 2018

FEC Identification Number

C
Transaction ID : SB21B.19943
Amount of Each Disbursement this Period
7.42

Memo Item

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

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

22.76

**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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2018

FEC Identification Number

C
Transaction ID : SB21B.19944
Amount of Each Disbursement this Period
5.26

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 28 / 2018

FEC Identification Number

C
Transaction ID : SB21B.19945
Amount of Each Disbursement this Period
3.79

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 29 / 2018

FEC Identification Number

C
Transaction ID : SB21B.19946
Amount of Each Disbursement this Period
7.55

Memo Item

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

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

16.60

**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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. SUPER COLOR DIGITAL		Date of Disbursement MM / DD / YYYY 06 / 19 / 2018
Mailing Address 16761 HALE AVE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23838 Amount of Each Disbursement this Period 522.00
City IRVINE	State CA	Zip Code 92606
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19908]: DONOR COLLATERAL		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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. THE POLLING COMPANY		Date of Disbursement MM / DD / YYYY 06 / 08 / 2018
Mailing Address 400 NORTH CAPITOL STREET, NW SUITE 790		FEC Identification Number C [REDACTED] Transaction ID : SB21B.19947 Amount of Each Disbursement this Period 65234.00
City WASHINGTON	State DC	Zip Code 20001
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) C. TRUMP INTERNATIONAL HOTEL AND TOWER NEW YORK		Date of Disbursement MM / DD / YYYY 03 / 15 / 2018
Mailing Address ONE CENTRAL PARK WEST		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23682 Amount of Each Disbursement this Period 523.88
City NEW YORK	State NY	Zip Code 10023
Purpose of Disbursement REIMBURSEMENT [SB21B.19900]: 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 checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	65234.00
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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. TRUMP INTERNATIONAL HOTEL WASHINGTON, D.C.		Date of Disbursement MM / DD / YYYY 03 / 29 / 2018
Mailing Address 1100 PENNSYLVANIA AVENUE NW		FEC Identification Number C [] Transaction ID : SB21B.23678 Amount of Each Disbursement this Period [] 369.06
City WASHINGTON	State DC	Zip Code 20004
Purpose of Disbursement REIMBURSEMENT [SB21B.19899]: 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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. TRUMP INTERNATIONAL HOTEL WASHINGTON, D.C.		Date of Disbursement MM / DD / YYYY 03 / 29 / 2018
Mailing Address 1100 PENNSYLVANIA AVENUE NW		FEC Identification Number C [] Transaction ID : SB21B.23679 Amount of Each Disbursement this Period [] 14.00
City WASHINGTON	State DC	Zip Code 20004
Purpose of Disbursement REIMBURSEMENT [SB21B.19899]: TRAVEL: MEALS		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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. TRUMP INTERNATIONAL HOTEL WASHINGTON, D.C.		Date of Disbursement MM / DD / YYYY 05 / 14 / 2018
Mailing Address 1100 PENNSYLVANIA AVENUE NW		FEC Identification Number C [] Transaction ID : SB21B.23711 Amount of Each Disbursement this Period [] 78.00
City WASHINGTON	State DC	Zip Code 20004
Purpose of Disbursement REIMBURSEMENT [SB21B.19913]: MEETING EXPENSE		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 checked="" type="checkbox"/> 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 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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. TRUMP INTERNATIONAL HOTEL WASHINGTON, D.C.		Date of Disbursement MM / DD / YYYY 05 / 14 / 2018
Mailing Address 1100 PENNSYLVANIA AVENUE NW		FEC Identification Number C [] Transaction ID : SB21B.23759 Amount of Each Disbursement this Period [] 1337.28
City WASHINGTON	State DC	Zip Code 20004
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19878]: 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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. TRUMP INTERNATIONAL HOTEL WASHINGTON, D.C.		Date of Disbursement MM / DD / YYYY 05 / 29 / 2018
Mailing Address 1100 PENNSYLVANIA AVENUE NW		FEC Identification Number C [] Transaction ID : SB21B.23783 Amount of Each Disbursement this Period [] 1762.92
City WASHINGTON	State DC	Zip Code 20004
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19880]: 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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. TRUMP INTERNATIONAL HOTEL WASHINGTON, D.C.		Date of Disbursement MM / DD / YYYY 05 / 31 / 2018
Mailing Address 1100 PENNSYLVANIA AVENUE NW		FEC Identification Number C [] Transaction ID : SB21B.1989c Amount of Each Disbursement this Period [] 27207.60
City WASHINGTON	State DC	Zip Code 20004
Purpose of Disbursement EVENT EXPENSE: FACILITY RENTAL AND CATERING		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	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 27207.60
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. TRUMP INTERNATIONAL HOTEL WASHINGTON, D.C.

Mailing Address 1100 PENNSYLVANIA AVENUE NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
EVENT EXPENSE: FACILITY RENTAL AND CATERING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
06 / 08 / 2018

FEC Identification Number

C
Transaction ID : SB21B.19949
Amount of Each Disbursement this Period
33800.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TRUMP INTERNATIONAL HOTEL WASHINGTON, D.C.

Mailing Address 1100 PENNSYLVANIA AVENUE NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.19905]: TRAVEL: LODGING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
06 / 08 / 2018

FEC Identification Number

C
Transaction ID : SB21B.23805
Amount of Each Disbursement this Period
1450.72

Memo Item

Full Name (Last, First, Middle Initial)

C. TRUMP INTERNATIONAL HOTEL WASHINGTON, D.C.

Mailing Address 1100 PENNSYLVANIA AVENUE NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.19908]: TRAVEL: LODGING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
06 / 15 / 2018

FEC Identification Number

C
Transaction ID : SB21B.23834
Amount of Each Disbursement this Period
844.66

Memo Item

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

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

33800.00

**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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT [SB21B.19910]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2018

FEC Identification Number

C
Transaction ID : SB21B.23707
Amount of Each Disbursement this Period
23.97

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT [SB21B.19910]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 04 / 2018

FEC Identification Number

C
Transaction ID : SB21B.23704
Amount of Each Disbursement this Period
13.81

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT [SB21B.19910]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2018

FEC Identification Number

C
Transaction ID : SB21B.23695
Amount of Each Disbursement this Period
20.12

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 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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT [SB21B.19910]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2018

FEC Identification Number

C
Transaction ID : SB21B.23696
Amount of Each Disbursement this Period
19.05

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT [SB21B.19913]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2018

FEC Identification Number

C
Transaction ID : SB21B.23714
Amount of Each Disbursement this Period
19.08

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT [SB21B.19913]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2018

FEC Identification Number

C
Transaction ID : SB21B.23715
Amount of Each Disbursement this Period
12.71

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 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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT [SB21B.19910]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2018

FEC Identification Number

C
Transaction ID : SB21B.23691
Amount of Each Disbursement this Period
15.44

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT [SB21B.19913]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 21 / 2018

FEC Identification Number

C
Transaction ID : SB21B.23716
Amount of Each Disbursement this Period
142.49

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT [SB21B.19910]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2018

FEC Identification Number

C
Transaction ID : SB21B.23686
Amount of Each Disbursement this Period
5.00

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 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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT [SB21B.19910]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2018

FEC Identification Number

C
Transaction ID : SB21B.23687
Amount of Each Disbursement this Period
29.72

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT [SB21B.19910]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2018

FEC Identification Number

C
Transaction ID : SB21B.23688
Amount of Each Disbursement this Period
23.72

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT [SB21B.19910]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2018

FEC Identification Number

C
Transaction ID : SB21B.23688
Amount of Each Disbursement this Period
22.71

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 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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT [SB21B.19913]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2018

FEC Identification Number

C
Transaction ID : SB21B.23725
Amount of Each Disbursement this Period
104.75

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT [SB21B.19913]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 29 / 2018

FEC Identification Number

C
Transaction ID : SB21B.23728
Amount of Each Disbursement this Period
42.30

Memo Item

Full Name (Last, First, Middle Initial)

C. UNITED AIRLINES

Mailing Address 900 GRAND PLAZA DR
SUITE 430

City HOUSTON State TX Zip Code 77067

Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19907]: TRAVEL: AIR
Candidate Name

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

Date of Disbursement

MM / DD / YYYY
06 / 18 / 2018

FEC Identification Number

C
Transaction ID : SB21B.2382:
Amount of Each Disbursement this Period
1204.40

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 DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 18 / 2018
Mailing Address 900 GRAND PLAZA DR SUITE 430		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23824 Amount of Each Disbursement this Period [REDACTED] 1204.40
City HOUSTON	State TX	Zip Code 77067
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19907]: 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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 18 / 2018
Mailing Address 900 GRAND PLAZA DR SUITE 430		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23825 Amount of Each Disbursement this Period [REDACTED] 159.00
City HOUSTON	State TX	Zip Code 77067
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19907]: 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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 18 / 2018
Mailing Address 900 GRAND PLAZA DR SUITE 430		FEC Identification Number C [REDACTED] Transaction ID : SB21B.2382t Amount of Each Disbursement this Period [REDACTED] 159.00
City HOUSTON	State TX	Zip Code 77067
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19907]: 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 checked="" type="checkbox"/> Memo Item	

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

[REDACTED] 0.00

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 18 / 2018
Mailing Address 900 GRAND PLAZA DR SUITE 430		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23827 Amount of Each Disbursement this Period [REDACTED] 159.00
City HOUSTON	State TX	Zip Code 77067
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19907]: 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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 18 / 2018
Mailing Address 900 GRAND PLAZA DR SUITE 430		FEC Identification Number C [REDACTED] Transaction ID : SB21B.23828 Amount of Each Disbursement this Period [REDACTED] 159.00
City HOUSTON	State TX	Zip Code 77067
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.19907]: 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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WALSH, BRIAN, , ,		Date of Disbursement MM / DD / YYYY 06 / 22 / 2018
Mailing Address C/O AMERICA FIRST ACTION INC 1400 CRYSTAL DRIVE STE 850		FEC Identification Number C [REDACTED] Transaction ID : SB21B.19911 Amount of Each Disbursement this Period [REDACTED] 1781.89
City ARLINGTON	State VA	Zip Code 22202
Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED		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] 1781.89
TOTAL This Period (last page this line number only).....▶	[REDACTED] 483867.43

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.
FEC IDENTIFICATION NUMBER
C C00637512

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: ADVANTAGE DIRECT
Mailing Address: 2300 CLARENDON BOULEVARD, SUITE 303, ARLINGTON, VA 22201
Purpose of Expenditure: VOTER ID PHONE CALLS
Date of Public Distribution/Dissemination: 06/14/2018
Amount: 22800.00
Transaction ID: SE.19841
Date of Disbursement or Obligation: 06/15/2018
Name of Federal Candidate: DONOVAN, DAN, , , Support
Office Sought: House, District: 11, State: NY
Disbursement For: Primary

Full Name of Payee: ADVANTAGE DIRECT
Mailing Address: 2300 CLARENDON BOULEVARD, SUITE 303, ARLINGTON, VA 22201
Purpose of Expenditure: TELEMARKETING AND DATA MANAGEMENT SERVICES
Date of Public Distribution/Dissemination: 06/21/2018
Amount: 6342.45
Transaction ID: SE.19866
Date of Disbursement or Obligation: 06/22/2018
Name of Federal Candidate: DONOVAN, DAN, , , Support
Office Sought: House, District: 11, State: NY
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 29142.45
(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.

PROCH, JON, , ,

[Electronically Filed]

Date 07/15/2018

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) AMERICA FIRST ACTION, INC.	FEC IDENTIFICATION NUMBER ▼ C C00637512
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee ADVANTAGE DIRECT <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 2300 CLARENDON BOULEVARD SUITE 303	Amount <input type="text"/> 1048.05 Transaction ID : SE.19871 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City ARLINGTON State VA Zip Code 22201	
Purpose of Expenditure TELEMARKETING AND DATA MANAGEMENT SERVICES Category/Type <input type="text"/>	
Name of Federal Candidate: DONOVAN, DAN, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 11 State: NY
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 163428.19	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee ADVANTAGE DIRECT <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 2300 CLARENDON BOULEVARD SUITE 303	Amount <input type="text"/> 12951.85 Transaction ID : SE.19869 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City ARLINGTON State VA Zip Code 22201	
Purpose of Expenditure TELEMARKETING AND DATA MANAGEMENT SERVICES Category/Type <input type="text"/>	
Name of Federal Candidate: DONOVAN, DAN, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 11 State: NY
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 176380.04	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 13999.90
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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.

PROCH, JON, , ,

[Electronically Filed]

Date / /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) AMERICA FIRST ACTION, INC.	FEC IDENTIFICATION NUMBER ▼ C C00637512
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee CONVERGENCE MEDIA LLC <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address PO BOX 711024		Amount <input type="text"/>	
City HERNDON	State VA	Zip Code 20171	33200.00
Purpose of Expenditure DIGITAL ADVERTISING		Category/Type <input type="text"/>	Transaction ID : SE.19853 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: DONOVAN, DAN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 11 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
93159.70		2018	

Full Name of Payee CONVERGENCE MEDIA LLC <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address PO BOX 711024		Amount <input type="text"/>	
City HERNDON	State VA	Zip Code 20171	8000.00
Purpose of Expenditure DIGITAL PRODUCTION COST		Category/Type <input type="text"/>	Transaction ID : SE.19855 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: DONOVAN, DAN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 11 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
101159.70		2018	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
41200.00	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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PROCH, JON, , ,

[Electronically Filed]

Date / /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) AMERICA FIRST ACTION, INC.	FEC IDENTIFICATION NUMBER ▼ C C00637512
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee CONVERGENCE MEDIA LLC <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address PO BOX 711024		Amount <input type="text"/>	
City HERNDON	State VA	Zip Code 20171	Transaction ID : SE.19873
Purpose of Expenditure DIGITAL ADVERTISING		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: DONOVAN, DAN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 11 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee POLITICAL INK, INC <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1200 18TH STREET NW SUITE #700		Amount <input type="text"/>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.19846
Purpose of Expenditure DIRECT MAIL PRINTING AND POSTAGE		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: DONOVAN, DAN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 11 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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.

PROCH, JON, , ,

[Electronically Filed]

Date / /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) AMERICA FIRST ACTION, INC.	FEC IDENTIFICATION NUMBER ▼ C C00637512
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item POLITICAL INK, INC	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1200 18TH STREET NW SUITE #700	Amount <input type="text"/> 18579.85 Transaction ID : SE.19850 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City WASHINGTON State DC Zip Code 20036	
Purpose of Expenditure DIRECT MAIL PRINTING AND POSTAGE Category/Type <input type="text"/>	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose DONOVAN, DAN, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 11 State: NY
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 59959.70	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item POLITICAL INK, INC	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1200 18TH STREET NW SUITE #700	Amount <input type="text"/> 17799.07 Transaction ID : SE.19857 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City WASHINGTON State DC Zip Code 20036	
Purpose of Expenditure DIRECT MAIL PRINTING AND POSTAGE Category/Type <input type="text"/>	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose DONOVAN, DAN, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 11 State: NY
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 118958.77	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 36378.92
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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.

PROCH, JON, , ,

[Electronically Filed]

Date

/ /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) AMERICA FIRST ACTION, INC.	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00637512 </div>
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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 <input type="checkbox"/> Memo Item POLITICAL INK, INC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 06 / 20 / 2018
Mailing Address 1200 18TH STREET NW SUITE #700	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 18579.85 </div>
City WASHINGTON State DC Zip Code 20036	
Purpose of Expenditure DIRECT MAIL PRINTING AND POSTAGE Category/Type 	
Name of Federal Candidate: DONOVAN, DAN, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 11 State: NY
Calendar Year-To-Date Per Election for Office Sought 137538.62	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item POLITICAL INK, INC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 06 / 21 / 2018
Mailing Address 1200 18TH STREET NW SUITE #700	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 17799.07 </div>
City WASHINGTON State DC Zip Code 20036	
Purpose of Expenditure DIRECT MAIL PRINTING AND POSTAGE Category/Type 	
Name of Federal Candidate: DONOVAN, DAN, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 11 State: NY
Calendar Year-To-Date Per Election for Office Sought 155337.69	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 36378.92 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 176380.04 </div>

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PROCH, JON, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
07 / 15 / 2018

Signature