

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
MAGA COALITION, INC.

ADDRESS (number and street) 1001 Brickell Bay Drive Ste 2700 Miami FL 33131
Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C C00654343 3. IS THIS REPORT NEW OR AMENDED (A) [X]

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports: April 15, July 15, October 15, January 31 (selected), July 31 Mid-Year, Termination Report
(b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31
(c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special
(d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 07 / 01 / 2017 through 12 / 31 / 2017

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

Signature of Treasurer Hassine, Brian, , , [Electronically Filed] Date 06 / 28 / 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

**MAGA COALITION, 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="2017"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="173054.44"/>	<input type="text" value="173054.44"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="173054.44"/>	<input type="text" value="173054.44"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="135788.69"/>	<input type="text" value="135788.69"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="37265.75"/>	<input type="text" value="37265.75"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**MAGA COALITION, 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).....	151804.44	151804.44
(ii) Unitemized .....	1250.00	1250.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	153054.44	153054.44
(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) .....	153054.44	153054.44
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).....	20000.00	20000.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	173054.44	173054.44
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	173054.44	173054.44

**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.....	799.88	799.88
(b) Other Federal Operating Expenditures .....	134988.81	134988.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	135788.69	135788.69
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	135788.69	135788.69
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	134988.81	134988.81

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	153054.44	153054.44
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	153054.44	153054.44
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	134988.81	134988.81
37. Offsets to Operating Expenditures (from Line 15, page 3).....	20000.00	20000.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	114988.81	114988.81

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 53
	(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

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)  
**MAGA COALITION, INC.**

**A. Carver, Victoria, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 45 W. 56th Place  
 City Westmont State IL Zip Code 60559  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Shriver Capacity INS Occupation (for Individual) Administrative Assistant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 14 / 2017  
**Transaction ID : SA11AI.4344**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Ewing, Sandra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 27760 Somerset Lane  
 City San Juan Capistrano State CA Zip Code 92675  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self employed Occupation (for Individual) Real Estate Investor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 11 / 2017  
**Transaction ID : SA11AI.4360**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Fausz, Glenn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5104 San Luis Rey  
 City Sylvania State OH Zip Code 43560  
 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 10 / 15 / 2017  
**Transaction ID : SA11AI.4342**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1800.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**MAGA COALITION, INC.**

**A. Gifford, Sharon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1699 Illinois Street  
 City Lake Charles State LA Zip Code 70607  
 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 11 / 13 / 2017  
**Transaction ID : SA11AI.4356**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Gifford, Sharon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1699 Illinois Street  
 City Lake Charles State LA Zip Code 70607  
 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 12 / 20 / 2017  
**Transaction ID : SA11AI.4354**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Gutman, Laura, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 310 Watts Street  
 City Durham State NC Zip Code 27701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self employed Occupation (for Individual) Medical Doctor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 17 / 2017  
**Transaction ID : SA11AI.4327**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00  
**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 8 OF 53
	(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

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)  
**MAGA COALITION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Hassine, Brian, , ,</b>		Date of Receipt
Mailing Address 28241 Crown Valley Pkwy Suite E		<input type="text" value="09"/> / <input type="text" value="03"/> / <input type="text" value="2017"/>
City Laguna Niguel	State CA	Zip Code 92677
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4365</b>
Name of Employer (for Individual) Nuggets and Carats		Amount of Each Receipt this Period <input type="text" value="400.00"/>
Occupation (for Individual) Jeweler, CEO		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Hassine, Brian, , ,</b>		Date of Receipt
Mailing Address 28241 Crown Valley Pkwy Suite E		<input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2017"/>
City Laguna Niguel	State CA	Zip Code 92677
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4315</b>
Name of Employer (for Individual) Nuggets and Carats		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Occupation (for Individual) Jeweler, CEO		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Hassine, Brian, , ,</b>		Date of Receipt
Mailing Address 28241 Crown Valley Pkwy Suite E		<input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2017"/>
City Laguna Niguel	State CA	Zip Code 92677
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4314</b>
Name of Employer (for Individual) Nuggets and Carats		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation (for Individual) Jeweler, CEO		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="6400.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 53
<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)  
**MAGA COALITION, INC.**

**A. Hassine, Brian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 28241 Crown Valley Pkwy  
 Suite E  
 City Laguna Niguel State CA Zip Code 92677  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Nuggets and Carats Occupation (for Individual) Jeweler, CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **12 / 24 / 2017**  
**Transaction ID : SA11AI.4312**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Kinney, Doug, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9613 South Lake Shore Dr.  
 City Lees Summit State MO Zip Code 64086  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DAK Investment Group Occupation (for Individual) Owner, CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt **09 / 11 / 2017**  
**Transaction ID : SA11AI.4316**  
 Amount of Each Receipt this Period 100000.00  
 Memo Item

**C. Le Doux, Julie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 64 Dow Road  
 City Hollis State NH 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 ▼ 250.00

Date of Receipt **09 / 25 / 2017**  
**Transaction ID : SA11AI.4346**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	101250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 10 OF 53  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**MAGA COALITION, INC.**

**A. Luskin, Carma, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11106 Saddle Road  
 City Monterey State CA Zip Code 93940  
 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 ▼ 400.00

Date of Receipt 09 / 21 / 2017  
**Transaction ID : SA11AI.4348**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**B. Mather, Timothy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1999 Broadway Suite 1550  
 City Denver State CO Zip Code 80202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CGQ.com Financial Trading Software, CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2017  
**Transaction ID : SA11AI.4336**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Mobilecause**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 27001 Agoura Rd #350A  
 City Calabasas State CA Zip Code 91301  
 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 ▼ 425.00

Date of Receipt 10 / 23 / 2017  
**Transaction ID : SA11AI.4501**  
 Amount of Each Receipt this Period 325.00  
 Memo Item  
 Individual Contributions

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 775.00  
**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 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**MAGA COALITION, INC.**

**A. Mobilecause**

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

Mailing Address 27001 Agoura Rd  
#350A

City Calabasas State CA Zip Code 91301

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 ▼  
575.00

Date of Receipt  
10 / 23 / 2017

**Transaction ID : SA11AI.4502**

Amount of Each Receipt this Period  
150.00

Memo Item  
Individual Contributions

**B. Mobilecause**

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

Mailing Address 27001 Agoura Rd  
#350A

City Calabasas State CA Zip Code 91301

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 ▼  
825.00

Date of Receipt  
10 / 23 / 2017

**Transaction ID : SA11AI.4503**

Amount of Each Receipt this Period  
250.00

Memo Item  
Individual Contributions

**C. Mobilecause**

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

Mailing Address 27001 Agoura Rd  
#350A

City Calabasas State CA Zip Code 91301

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 ▼  
1875.00

Date of Receipt  
10 / 24 / 2017

**Transaction ID : SA11AI.4500**

Amount of Each Receipt this Period  
1050.00

Memo Item  
Individual Contributions

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 OF 53
	(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

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)  
**MAGA COALITION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Mobilecause</b>		Date of Receipt
Mailing Address 27001 Agoura Rd #350A		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2017"/>
City Calabasas	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4497</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="35.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item Individual Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1910.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Mobilecause</b>		Date of Receipt
Mailing Address 27001 Agoura Rd #350A		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2017"/>
City Calabasas	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4498</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="75.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item Individual Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1985.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Mobilecause</b>		Date of Receipt
Mailing Address 27001 Agoura Rd #350A		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2017"/>
City Calabasas	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4492</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="35.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item Individual Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="2020.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="145.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 53
	<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)  
**MAGA COALITION, INC.**

**A. Mobilecause**

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

Mailing Address 27001 Agoura Rd #350A

City Calabasas State CA Zip Code 91301

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 ▼  
2115.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2017

**Transaction ID : SA11AI.4493**

Amount of Each Receipt this Period  
95.00

Memo Item  
Individual Contributions

**B. Mobilecause**

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

Mailing Address 27001 Agoura Rd #350A

City Calabasas State CA Zip Code 91301

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 ▼  
2590.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2017

**Transaction ID : SA11AI.4494**

Amount of Each Receipt this Period  
475.00

Memo Item  
Individual Contributions

**C. Mobilecause**

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

Mailing Address 27001 Agoura Rd #350A

City Calabasas State CA Zip Code 91301

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 ▼  
2740.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2017

**Transaction ID : SA11AI.4489**

Amount of Each Receipt this Period  
150.00

Memo Item  
Individual Contributions

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	720.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 OF 53
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**MAGA COALITION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Mobilecause</b>		Date of Receipt
Mailing Address 27001 Agoura Rd #350A		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2017"/>
City Calabasas	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4488</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="300.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item Individual Contributions
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="3040.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Mobilecause</b>		Date of Receipt
Mailing Address 27001 Agoura Rd #350A		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2017"/>
City Calabasas	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4486</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="60.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item Individual Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="3100.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Mobilecause</b>		Date of Receipt
Mailing Address 27001 Agoura Rd #350A		<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2017"/>
City Calabasas	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4485</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="110.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item Individual Contributions
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="3210.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="470.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 53
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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

NAME OF COMMITTEE (In Full)  
**MAGA COALITION, INC.**

**A. Mobilecause**

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

Mailing Address 27001 Agoura Rd #350A

City Calabasas	State CA	Zip Code 91301
-------------------	-------------	-------------------

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 ▼  
3295.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2017

**Transaction ID : SA11AI.4480**

Amount of Each Receipt this Period  
85.00

Memo Item  
Individual Contribution

**B. Mobilecause**

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

Mailing Address 27001 Agoura Rd #350A

City Calabasas	State CA	Zip Code 91301
-------------------	-------------	-------------------

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 ▼  
3320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2017

**Transaction ID : SA11AI.4481**

Amount of Each Receipt this Period  
25.00

Memo Item  
Individual Contribution

**C. Mobilecause**

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

Mailing Address 27001 Agoura Rd #350A

City Calabasas	State CA	Zip Code 91301
-------------------	-------------	-------------------

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 ▼  
3772.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2017

**Transaction ID : SA11AI.4482**

Amount of Each Receipt this Period  
452.00

Memo Item  
Individual Contributions

<b>SUBTOTAL</b> of Receipts This Page (optional).....	562.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 53
	<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)  
**MAGA COALITION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Mobilecause</b>		Date of Receipt
Mailing Address 27001 Agoura Rd #350A		<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2017"/>
City Calabasas	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4484</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="1550.29"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item Individual Contributions
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5322.29"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Mobilecause</b>		Date of Receipt
Mailing Address 27001 Agoura Rd #350A		<input type="text" value="11"/> / <input type="text" value="08"/> / <input type="text" value="2017"/>
City Calabasas	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4479</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="150.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item Individual Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5472.29"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Mobilecause</b>		Date of Receipt
Mailing Address 27001 Agoura Rd #350A		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2017"/>
City Calabasas	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4477</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item Individual Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="5497.29"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1725.29"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>



**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 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**MAGA COALITION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Mobilecause</b>		Date of Receipt
Mailing Address 27001 Agoura Rd #350A		<input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2017"/>
City Calabasas	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4478</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item Individual Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5597.29"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Mobilecause</b>		Date of Receipt
Mailing Address 27001 Agoura Rd #350A		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2017"/>
City Calabasas	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4474</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="125.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item Individual Contributions
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5722.29"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Mobilecause</b>		Date of Receipt
Mailing Address 27001 Agoura Rd #350A		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2017"/>
City Calabasas	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4475</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="150.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item Individual Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="5872.29"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="375.00"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text"/>

**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 53
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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

NAME OF COMMITTEE (In Full)  
**MAGA COALITION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Mobilecause</b>		Date of Receipt
Mailing Address 27001 Agoura Rd #350A		<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2017"/>
City Calabasas	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4472</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="50.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item Individual Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5922.29"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Mobilecause</b>		Date of Receipt
Mailing Address 27001 Agoura Rd #350A		<input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2017"/>
City Calabasas	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4469</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5947.29"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Mobilecause</b>		Date of Receipt
Mailing Address 27001 Agoura Rd #350A		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2017"/>
City Calabasas	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4470</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="150.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item Individual Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="6097.29"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="225.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 OF 53
	(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

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)  
**MAGA COALITION, INC.**

**A. Mobilecause**

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

Mailing Address 27001 Agoura Rd  
#350A

City Calabasas	State CA	Zip Code 91301
-------------------	-------------	-------------------

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 ▼  
6122.29

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2017

**Transaction ID : SA11AI.4466**

Amount of Each Receipt this Period  
25.00

Memo Item  
Individual Contribution

**B. Mobilecause**

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

Mailing Address 27001 Agoura Rd  
#350A

City Calabasas	State CA	Zip Code 91301
-------------------	-------------	-------------------

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 ▼  
6147.29

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2017

**Transaction ID : SA11AI.4467**

Amount of Each Receipt this Period  
25.00

Memo Item  
Individual Contribution

**C. Mobilecause**

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

Mailing Address 27001 Agoura Rd  
#350A

City Calabasas	State CA	Zip Code 91301
-------------------	-------------	-------------------

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 ▼  
6187.29

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		27		2017

**Transaction ID : SA11AI.4465**

Amount of Each Receipt this Period  
40.00

Memo Item  
Individual Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	90.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 53
	<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)  
**MAGA COALITION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name		Date of Receipt
<b>A. Mobilecause</b>		<input type="text" value="11"/> / <input type="text" value="29"/> / <input type="text" value="2017"/>
Mailing Address 27001 Agoura Rd #350A		<b>Transaction ID : SA11AI.4464</b>
City Calabasas	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="125.00"/>
Name of Employer (for Individual)	Occupation (for Individual)	<input type="checkbox"/> Memo Item Individual Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="6312.29"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name		Date of Receipt
<b>B. Mobilecause</b>		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2017"/>
Mailing Address 27001 Agoura Rd #350A		<b>Transaction ID : SA11AI.4446</b>
City Calabasas	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer (for Individual)	Occupation (for Individual)	<input type="checkbox"/> Memo Item Individual contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="6337.29"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name		Date of Receipt
<b>C. Mobilecause</b>		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2017"/>
Mailing Address 27001 Agoura Rd #350A		<b>Transaction ID : SA11AI.4448</b>
City Calabasas	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer (for Individual)	Occupation (for Individual)	<input type="checkbox"/> Memo Item Individual Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="6362.29"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="175.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**MAGA COALITION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Mobilecause</b>		Date of Receipt
Mailing Address 27001 Agoura Rd #350A		<input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2017"/>
City Calabasas	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4451</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="152.76"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item Individual Contributions
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="6515.05"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Mobilecause</b>		Date of Receipt
Mailing Address 27001 Agoura Rd #350A		<input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2017"/>
City Calabasas	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4452</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="110.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item Individual Contributions
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="6625.05"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Mobilecause</b>		Date of Receipt
Mailing Address 27001 Agoura Rd #350A		<input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2017"/>
City Calabasas	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4453</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="85.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item Individual Contributions
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="6710.05"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="347.76"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 53
<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)  
**MAGA COALITION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Mobilecause</b>		Date of Receipt
Mailing Address 27001 Agoura Rd #350A		<input type="text" value="12"/> / <input type="text" value="07"/> / <input type="text" value="2017"/>
City Calabasas	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4454</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="6810.05"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Mobilecause</b>		Date of Receipt
Mailing Address 27001 Agoura Rd #350A		<input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2017"/>
City Calabasas	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4455</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item Individual Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="6835.05"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Mobilecause</b>		Date of Receipt
Mailing Address 27001 Agoura Rd #350A		<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2017"/>
City Calabasas	State CA	Zip Code 91301
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4456</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="175.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item Individual Contributions
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="7010.05"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="300.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**MAGA COALITION, INC.**

**A. Mobilecause**

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

Mailing Address 27001 Agoura Rd  
#350A

City Calabasas State CA Zip Code 91301

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 ▼  
7115.05

Date of Receipt  
12 / 11 / 2017

**Transaction ID : SA11AI.4457**

Amount of Each Receipt this Period  
105.00

Memo Item  
Individual Contributions

**B. Mobilecause**

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

Mailing Address 27001 Agoura Rd  
#350A

City Calabasas State CA Zip Code 91301

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 ▼  
7165.05

Date of Receipt  
12 / 12 / 2017

**Transaction ID : SA11AI.4458**

Amount of Each Receipt this Period  
50.00

Memo Item  
Individual Contribution

**C. Mobilecause**

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

Mailing Address 27001 Agoura Rd  
#350A

City Calabasas State CA Zip Code 91301

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 ▼  
7175.05

Date of Receipt  
12 / 15 / 2017

**Transaction ID : SA11AI.4459**

Amount of Each Receipt this Period  
10.00

Memo Item  
Individual Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	165.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 53
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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

NAME OF COMMITTEE (In Full)  
**MAGA COALITION, INC.**

**A. Mobilecause**

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

Mailing Address 27001 Agoura Rd  
#350A

City Calabasas	State CA	Zip Code 91301
-------------------	-------------	-------------------

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 ▼  
7225.05

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 18 / 2017

**Transaction ID : SA11AI.4460**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. Mobilecause**

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

Mailing Address 27001 Agoura Rd  
#350A

City Calabasas	State CA	Zip Code 91301
-------------------	-------------	-------------------

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 ▼  
7250.05

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 26 / 2017

**Transaction ID : SA11AI.4461**

Amount of Each Receipt this Period  
25.00

Memo Item  
Individual Contribution

**C. Mobilecause**

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

Mailing Address 27001 Agoura Rd  
#350A

City Calabasas	State CA	Zip Code 91301
-------------------	-------------	-------------------

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 ▼  
7275.05

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 26 / 2017

**Transaction ID : SA11AI.4462**

Amount of Each Receipt this Period  
25.00

Memo Item  
Individual Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**MAGA COALITION, INC.**

**A. Mobilecause**

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

Mailing Address 27001 Agoura Rd  
#350A

City Calabasas State CA Zip Code 91301

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 ▼  
7290.05

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 28 / 2017

**Transaction ID : SA11AI.4463**

Amount of Each Receipt this Period  
15.00

Memo Item  
Individual Contribution

**B. PayPal**

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

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 01 / 2017

**Transaction ID : SA11AI.4443**

Amount of Each Receipt this Period  
1000.00

Memo Item  
Individual Contributions under \$200

**C. PayPal**

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

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

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 ▼  
8400.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 08 / 2017

**Transaction ID : SA11AI.4445**

Amount of Each Receipt this Period  
7400.00

Memo Item  
Individual contributions under \$200

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8415.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 53
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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

NAME OF COMMITTEE (In Full)  
**MAGA COALITION, INC.**

**A. PayPal**

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

Mailing Address 2211 North First Street

City San Jose	State CA	Zip Code 95131
------------------	-------------	-------------------

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 ▼  
9791.43

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2017

**Transaction ID : SA11AI.4490**

Amount of Each Receipt this Period  
1391.43

Memo Item  
Individual Contributions

**B. PayPal**

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

Mailing Address 2211 North First Street

City San Jose	State CA	Zip Code 95131
------------------	-------------	-------------------

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 ▼  
12336.43

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 02 / 2017

**Transaction ID : SA11AI.4506**

Amount of Each Receipt this Period  
2545.00

Memo Item  
Individual Contributions

**C. PayPal**

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

Mailing Address 2211 North First Street

City San Jose	State CA	Zip Code 95131
------------------	-------------	-------------------

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 ▼  
17685.15

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 12 / 2017

**Transaction ID : SA11AI.4505**

Amount of Each Receipt this Period  
5348.72

Memo Item  
Individual Contributions

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9285.15
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 OF 53
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**MAGA COALITION, INC.**

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

Mailing Address 2211 North First Street

City San Jose	State CA	Zip Code 95131
------------------	-------------	-------------------

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 ▼  
25423.76

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2017

**Transaction ID : SA11AI.4504**

Amount of Each Receipt this Period  
7738.61

Memo Item  
Individual Contributions

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

Mailing Address 2211 North First Street

City San Jose	State CA	Zip Code 95131
------------------	-------------	-------------------

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 ▼  
27568.14

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2017

**Transaction ID : SA11AI.4487**

Amount of Each Receipt this Period  
2144.38

Memo Item  
Individual Contributions

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

Mailing Address 2211 North First Street

City San Jose	State CA	Zip Code 95131
------------------	-------------	-------------------

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 ▼  
29269.39

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		20		2017

**Transaction ID : SA11AI.4471**

Amount of Each Receipt this Period  
1701.25

Memo Item  
Individual Contributions

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11584.24
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**MAGA COALITION, INC.**

**A. Schneider, Ryan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6627 Rio Vista Ct.  
 City Springboro State OH Zip Code 45066  
 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 ▼ 500.00

Date of Receipt 09 / 12 / 2017  
**Transaction ID : SA11AI.4352**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Schnell, Frieda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2104 West Marsala  
 City Pearland State TX Zip Code 77581  
 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 ▼ 255.00

Date of Receipt 09 / 03 / 2017  
**Transaction ID : SA11AI.4372**  
 Amount of Each Receipt this Period 255.00  
 Memo Item

**C. Street, Daniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 508 N. 31st St.  
 City Monroe State LA Zip Code 71201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Daniel Street, Esq. Attorney at Law  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 05 / 2017  
**Transaction ID : SA11AI.4363**  
 Amount of Each Receipt this Period 400.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1155.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 29 OF 53
<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)  
**MAGA COALITION, INC.**

**A. Van Dyk, Henrietta, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8087 S. Wolfe Road  
 City French Camp State CA Zip Code 95231  
 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 ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 28 / 2017  
**Transaction ID : SA11AI.4338**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**B. Wilcox, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 29426 Via Napoli  
 City Laguna Niguel State CA Zip Code 92677  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Coast Community College Dist. Instructor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 28 / 2017  
**Transaction ID : SA11AI.4310**  
 Amount of Each Receipt this Period  
 240.00  
 Memo Item

**C. Wilson, Brian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 107 Herons Nest Lane  
 City St. Augustine State FL Zip Code 32080  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Jack Wilson Chevrolet Business Owner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 10 / 2017  
**Transaction ID : SA11AI.4358**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1040.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 30 OF 53  
(check only one)

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

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)  
**MAGA COALITION, INC.**

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

Mailing Address 7515 Main Street

City Houston	State TX	Zip Code 77030
-----------------	-------------	-------------------

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

Name of Employer (for Individual) RGD	Occupation (for Individual) Medical Doctor
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09	/	12	/	2017

**Transaction ID : SA11AI.4350**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	151804.44

**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 53
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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)  
**MAGA COALITION, INC.**

**A. Threat Knowledge Group, LLC**

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

Mailing Address 6841 Elm Street  
# 1182

City McLean State VA Zip Code 22101

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 ▼  
20000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2017

**Transaction ID : SA15.4530**

Amount of Each Receipt this Period  
20000.00

Memo Item  
Sebastian Gorka Wire Transfer Refund

**B.**

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

**C.**

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	20000.00
<b>TOTAL</b> This Period (last page this line number only).....	20000.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA15

Transaction ID : SA15.4530

Returned strategic planning consulting fee upon non-renewal of contract.

Form/Schedule:

Transaction ID:



**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)  
**MAGA COALITION, INC.**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 4333 Amon Carter Blvd.

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement  
Travel-airline ticket for S. Gorka

002  
Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
09 / 29 / 2017

FEC Identification Number  
C  
Transaction ID : SB21B.4226  
Amount of Each Disbursement this Period  
404.40

Memo Item

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 4333 Amon Carter Blvd.

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement  
Travel- airline ticket for S. Gorka

002  
Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
10 / 23 / 2017

FEC Identification Number  
C  
Transaction ID : SB21B.4137  
Amount of Each Disbursement this Period  
884.40

Memo Item

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address 4333 Amon Carter Blvd.

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement  
travel

002  
Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
10 / 24 / 2017

FEC Identification Number  
C  
Transaction ID : SB21B.4133  
Amount of Each Disbursement this Period  
65.62

Memo Item

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

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

1354.42

**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

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)  
**MAGA COALITION, INC.**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 4333 Amon Carter Blvd.

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 03 / 2017

FEC Identification Number

C  
Transaction ID : **SB21B.4258**  
Amount of Each Disbursement this Period  
125.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 4333 Amon Carter Blvd.

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

002  
Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 05 / 2017

FEC Identification Number

C  
Transaction ID : **SB21B.4257**  
Amount of Each Disbursement this Period  
25.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. BLTPRIME**

Mailing Address 1100 Pennsylvania Avenue, NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
Food and Beverages for meeting with Adam Gingrich and Sebastian Gorka

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

003  
Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 16 / 2017

FEC Identification Number

C  
Transaction ID : **SB21B.4185**  
Amount of Each Disbursement this Period  
277.10

Memo Item

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

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

427.10

**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)  
**MAGA COALITION, INC.**

**A. Corporate Filings LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 30 N. Gould Street #7001

City Sheridan State WY Zip Code 82801

Purpose of Disbursement Legal Services-Articles of Incorporation amendment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 28 / 2017

FEC Identification Number: C

Transaction ID : SB21B.4299

Amount of Each Disbursement this Period: 135.00

Memo Item

**B. Cunningham, Tricia, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 273 Bowman Lane

City Apollo State PA Zip Code 15613

Purpose of Disbursement PR services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 01 / 2017

FEC Identification Number: C

Transaction ID : SB21B.4320

Amount of Each Disbursement this Period: 1500.00

Memo Item

**C. David Horowitz Freedom Center**

Full Name (Last, First, Middle Initial)

Mailing Address 14724 Ventura Blvd. S-820

City Sherman Oaks State CA Zip Code 91403

Purpose of Disbursement Event Sponsor/Table Sponsor for David Horowitz Freedom Center Restoration Weekend

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 16 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5069

Amount of Each Disbursement this Period: 5000.00

Memo Item

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

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

6635.00

**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)  
**MAGA COALITION, INC.**

Full Name (Last, First, Middle Initial) <b>A. David Horowitz Freedom Center</b>		Date of Disbursement MM / DD / YYYY 10 / 20 / 2017
Mailing Address 14724 Ventura Blvd. S-820		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5071</b>
City Sherman Oaks	State CA	Zip Code 91403
Purpose of Disbursement Event sponsor/table sponsor for David Horowitz Freedom Center Restoration <i>Weekend</i>		Amount of Each Disbursement this Period 5000.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 012	

Full Name (Last, First, Middle Initial) <b>B. Davinci Virtual Office</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2017
Mailing Address 2150 South 1300 East, Suite 200		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.4201</b>
City Salt Lake	State UT	Zip Code 84106
Purpose of Disbursement Office expense for virtual office for mail and forwarding services		Amount of Each Disbursement this Period 219.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Davinci Virtual Office</b>		Date of Disbursement MM / DD / YYYY 10 / 12 / 2017
Mailing Address 2150 South 1300 East, Suite 200		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.4203</b>
City Salt Lake	State UT	Zip Code 84106
Purpose of Disbursement Office expe for virtual office and mail forwarding services		Amount of Each Disbursement this Period 55.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5274.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**MAGA COALITION, INC.**

Full Name (Last, First, Middle Initial) <b>A. Davinci Virtual Office</b>		Date of Disbursement MM / DD / YYYY 11 / 11 / 2017
Mailing Address 2150 South 1300 East, Suite 200		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4245</b> Amount of Each Disbursement this Period [ ] 124.00
City Salt Lake	State UT	Zip Code 84106
Purpose of Disbursement Office expense for virtual office, mail and forwarding services		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Davinci Virtual Office</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2017
Mailing Address 2150 South 1300 East, Suite 200		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4302</b> Amount of Each Disbursement this Period [ ] 48.14
City Salt Lake	State UT	Zip Code 84106
Purpose of Disbursement Office expense for virtual office, mail and forwarding services		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Davinci Virtual Office</b>		Date of Disbursement MM / DD / YYYY 12 / 11 / 2017
Mailing Address 2150 South 1300 East, Suite 200		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4284</b> Amount of Each Disbursement this Period [ ] 124.00
City Salt Lake	State UT	Zip Code 84106
Purpose of Disbursement Office expense for virtual office, mail and forwarding services		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)..... ▶

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

[ ] 296.14
[ ]

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)

Form with checkboxes for line numbers 21b, 22, 23, 26, 27, 28a, 28b, 28c, 29, 30b. 21b is checked.

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)
MAGA COALITION, INC.

Form A: Davinci Virtual Office. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item.

Form B: Delta Airlines. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item.

Form C: Delta Airlines. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item.

SUBTOTAL of Disbursements This Page (optional)
TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**MAGA COALITION, INC.**

**A. Delta Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 1030 Delta Blvd.

City Atlanta State GA Zip Code 30354

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.4174**

Amount of Each Disbursement this Period: 428.40

Memo Item

**B. Delta Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 1030 Delta Blvd.

City Atlanta State GA Zip Code 30354

Purpose of Disbursement air travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 26 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.4130**

Amount of Each Disbursement this Period: 402.00

Memo Item

**C. E6M**

Full Name (Last, First, Middle Initial)

Mailing Address 1629 K Street, NW Suite 300

City Washington State DC Zip Code 20006

Purpose of Disbursement Website services- Mobilecause setup for onling fundraising (aka One Click Politics)

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 02 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.4216**

Amount of Each Disbursement this Period: 6000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6830.40

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

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
**MAGA COALITION, INC.**

Full Name (Last, First, Middle Initial)

**A. Facebook**

Mailing Address 1 Hacker Way

City Menlo State CA Zip Code 94205

Purpose of Disbursement Facebook ads

Category/Type

Candidate Name

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

Date of Disbursement  

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	6			2	0	1	7		

FEC Identification Number  
  
**Transaction ID : SB21B.4239**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook**

Mailing Address 1 Hacker Way

City Menlo State CA Zip Code 94205

Purpose of Disbursement Facebook ads

Category/Type

Candidate Name

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

Date of Disbursement  

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	8			2	0	1	7		

FEC Identification Number  
  
**Transaction ID : SB21B.4298**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook**

Mailing Address 1 Hacker Way

City Menlo State CA Zip Code 94205

Purpose of Disbursement Facebook ads

Category/Type

Candidate Name

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

Date of Disbursement  

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		3	0			2	0	1	7		

FEC Identification Number  
  
**Transaction ID : SB21B.4294**  
 Amount of Each Disbursement this Period

Memo Item

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

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**MAGA COALITION, INC.**

Full Name (Last, First, Middle Initial)

**A. Facebook**

Mailing Address 1 Hacker Way

City Menlo State CA Zip Code 94205

Purpose of Disbursement Internet Services

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
11 / 30 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.4295**  
 Amount of Each Disbursement this Period  
 3.89

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook**

Mailing Address 1 Hacker Way

City Menlo State CA Zip Code 94205

Purpose of Disbursement Facebook ads

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
12 / 01 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.4292**  
 Amount of Each Disbursement this Period  
 2.59

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook**

Mailing Address 1 Hacker Way

City Menlo State CA Zip Code 94205

Purpose of Disbursement Facebook ads

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
12 / 01 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.4293**  
 Amount of Each Disbursement this Period  
 247.41

Memo Item

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

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

253.89

**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)  
**MAGA COALITION, INC.**

Full Name (Last, First, Middle Initial)

**A. FunJet Vacations Travel Corp.**

Mailing Address 8907 N. Port Washington Rd.  
#100

City Milwaukee State WI Zip Code 53217

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

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

Memo Item

Full Name (Last, First, Middle Initial)

**B. FunJet Vacations Travel Corp.**

Mailing Address 8907 N. Port Washington Rd.  
#100

City Milwaukee State WI Zip Code 53217

Purpose of Disbursement  
Travel-car rental for S. Gorka

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.4222**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. FunJet Vacations Travel Corp.**

Mailing Address 8907 N. Port Washington Rd.  
#100

City Milwaukee State WI Zip Code 53217

Purpose of Disbursement  
Travel

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.4135**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**MAGA COALITION, INC.**

Full Name (Last, First, Middle Initial)

**A. Getty Images**

Mailing Address 605 5th Avenue South  
Suite 400

City Seattle State WA Zip Code 98104

Purpose of Disbursement  
Media license for image

Category/  
Type

Candidate Name

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

Date of Disbursement  
M M / D D / Y Y Y Y Y  
12 / 02 / 2017

FEC Identification Number  
  
**Transaction ID : SB21B.4290**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Hammock Beach Resort**

Mailing Address 200 Ocean Crest Dr.

City Palm Coast State FL Zip Code 32137

Purpose of Disbursement  
Facility room rental for Florida Fundraiser in Palm Coast

Category/  
Type

Candidate Name

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

Date of Disbursement  
M M / D D / Y Y Y Y Y  
10 / 02 / 2017

FEC Identification Number  
  
**Transaction ID : SB21B.4219**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Hammock Beach Resort**

Mailing Address 200 Ocean Crest Dr.

City Palm Coast State FL Zip Code 32137

Purpose of Disbursement  
Fundraiser Food/Beverages for Florida Fundraiser in Palm Coast Florida

Category/  
Type

Candidate Name

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

Date of Disbursement  
M M / D D / Y Y Y Y Y  
10 / 03 / 2017

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

Memo Item

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

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

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
**MAGA COALITION, INC.**

**A. Hammock Beach Resort**

Full Name (Last, First, Middle Initial)

Mailing Address 200 Ocean Crest Dr.

City Palm Coast State FL Zip Code 32137

Purpose of Disbursement Lodging/Hotel expenditures for Palm Coast Florida Fundraiser

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 19 / 2017

FEC Identification Number: C

Transaction ID : SB21B.4138

Amount of Each Disbursement this Period: 1284.92

Memo Item

**B. Harbor House Cafe**

Full Name (Last, First, Middle Initial)

Mailing Address 34157 Pacific Coast Hwy.

City Dana Point State CA Zip Code 92629

Purpose of Disbursement Business Entertainment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 05 / 2017

FEC Identification Number: C

Transaction ID : SB21B.4263

Amount of Each Disbursement this Period: 114.81

Memo Item

**C. Herman, Glenn, 1, ,**

Full Name (Last, First, Middle Initial)

Mailing Address 158 Griffith Road

City Tyler Hill State PA Zip Code 18469

Purpose of Disbursement Reimbursement see below

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 21 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5112

Amount of Each Disbursement this Period: 1500.00

Memo Item

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

2899.73

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

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
**MAGA COALITION, INC.**

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

Date of Disbursement: MM / DD / YYYY  
09 / 28 / 2017

Mailing Address 345 Park Avenue

City New York State NY Zip Code 10154

Purpose of Disbursement: Deposit required to open bank accounts on or about 9/11/2017

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C 00654343  
Transaction ID : SB21B.5112.1  
Amount of Each Disbursement this Period: 1500.00

Category/Type: 001

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Hilton Garden Inn**

Date of Disbursement: MM / DD / YYYY  
10 / 30 / 2017

Mailing Address 19677 E. Jackson Dr.

City Independence State MO Zip Code 64057

Purpose of Disbursement: travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C  
Transaction ID : SB21B.4272  
Amount of Each Disbursement this Period: 143.12

Category/Type: 002

Memo Item

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

Date of Disbursement: MM / DD / YYYY  
11 / 01 / 2017

Mailing Address 345 Park Avenue

City New York State NY Zip Code 10154

Purpose of Disbursement: service charges

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C  
Transaction ID : SB21B.4267  
Amount of Each Disbursement this Period: 25.00

Category/Type:

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 168.12

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

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
**MAGA COALITION, INC.**

**A. JPMorganChase**

Full Name (Last, First, Middle Initial)

Mailing Address 345 Park Avenue

City New York State NY Zip Code 10154

Purpose of Disbursement Bank reversal fee for S. Gorka wire transfer.

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 01 / 2017

FEC Identification Number: C

Transaction ID : SB21B.4526

Amount of Each Disbursement this Period: 45.00

Memo Item

**B. JPMorganChase**

Full Name (Last, First, Middle Initial)

Mailing Address 345 Park Avenue

City New York State NY Zip Code 10154

Purpose of Disbursement Service charges

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 01 / 2017

FEC Identification Number: C

Transaction ID : SB21B.4276

Amount of Each Disbursement this Period: 50.00

Memo Item

**C. Kidon LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1710 West Cyrus Creek Road

City Fort Lauderdale State FL Zip Code 33309

Purpose of Disbursement Research Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 26 / 2017

FEC Identification Number: C

Transaction ID : SB21B.4236

Amount of Each Disbursement this Period: 5500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5595.00

**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

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)  
**MAGA COALITION, INC.**

**A. Lamar Media**

Full Name (Last, First, Middle Initial)

Mailing Address 5321 Corporate Blvd

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement Promotional Advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 04 / 2017

FEC Identification Number: C

Transaction ID : SB21B.4274

Amount of Each Disbursement this Period: 7910.00

Memo Item

**B. MARKETINK**

Full Name (Last, First, Middle Initial)

Mailing Address 1406 E. 33rd Street

City Signal Hill State CA Zip Code 90755

Purpose of Disbursement Media Consulting for invoice 0093

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 08 / 2017

FEC Identification Number: C

Transaction ID : SB21B.4285

Amount of Each Disbursement this Period: 1500.00

Memo Item

**C. Mobilecause**

Full Name (Last, First, Middle Initial)

Mailing Address 27001 Agoura Rd #350A

City Calabasas State CA Zip Code 91301

Purpose of Disbursement Service Charges

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 02 / 2017

FEC Identification Number: C

Transaction ID : SB21B.4508

Amount of Each Disbursement this Period: 112.52

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 9522.52

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**MAGA COALITION, INC.**

Full Name (Last, First, Middle Initial)

**A. Mobilecause**

Mailing Address 27001 Agoura Rd  
#350A

City Calabasas State CA Zip Code 91301

Purpose of Disbursement  
Mobilecause fundraising system processing fee

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 04 / 2017

FEC Identification Number

C [ ]

Transaction ID : SB21B.5103

Amount of Each Disbursement this Period

[ ] 102.52

Memo Item

Full Name (Last, First, Middle Initial)

**B. NATIONBUILDER**

Mailing Address 520 S. Grand Avenue

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement  
Website services-to set up website, donation platform and hosting for three months

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 30 / 2017

FEC Identification Number

C [ ]

Transaction ID : SB21B.4305

Amount of Each Disbursement this Period

[ ] 5995.90

Memo Item

Full Name (Last, First, Middle Initial)

**C. Phillips, Brandon, , ,**

Mailing Address 3539 Apalachee Pkwy  
#3-186

City Tallahassee State FL Zip Code 32311

Purpose of Disbursement  
Political Strategy Consulting fees

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 04 / 2017

FEC Identification Number

C [ ]

Transaction ID : SB21B.4208

Amount of Each Disbursement this Period

[ ] 5000.00

Memo Item

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

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

[ ] 11098.42

[ ]



**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

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)  
**MAGA COALITION, INC.**

**A. Premier Table Linens**

Full Name (Last, First, Middle Initial)

Mailing Address 7321 N.W. 35th Street

City Miami State FL Zip Code 33122

Purpose of Disbursement signs-standard table skirt clips with velcro

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type: 003

Date of Disbursement: 10 / 20 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5094

Amount of Each Disbursement this Period: 277.72

Memo Item

**B. PRWEB NEWS SERVICE**

Full Name (Last, First, Middle Initial)

Mailing Address 12051 Indian Creek

City Beltsville State MD Zip Code 20705

Purpose of Disbursement PRWEB media fee

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type: 003

Date of Disbursement: 11 / 30 / 2017

FEC Identification Number: C

Transaction ID : SB21B.4303

Amount of Each Disbursement this Period: 559.00

Memo Item

**C. Queensboro Industries, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1400 Marsteller St.

City Wilmington State NC Zip Code 28401

Purpose of Disbursement T-shirts and branded cups for donors and supporters

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type: 003

Date of Disbursement: 10 / 12 / 2017

FEC Identification Number: C

Transaction ID : SB21B.4197

Amount of Each Disbursement this Period: 896.08

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1732.80

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**MAGA COALITION, INC.**

Full Name (Last, First, Middle Initial)

**A. Queensboro Industries, Inc.**

Mailing Address 1400 Marsteller St.

City Wilmington State NC Zip Code 28401

Purpose of Disbursement Set-up fee for MAGA Coalition webshop

003  
Category/Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
11 / 14 / 2017

FEC Identification Number  
C  
Transaction ID : SB21B.4242  
Amount of Each Disbursement this Period  
150.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Roger Marion, Esq.**

Mailing Address 488 Madison Avenue Suite 1120

City New York State NY Zip Code 10022

Purpose of Disbursement For Legal Services

Category/Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
10 / 10 / 2017

FEC Identification Number  
C  
Transaction ID : SB21B.4204  
Amount of Each Disbursement this Period  
2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Threat Knowledge Group, LLC**

Mailing Address 6841 Elm Street # 1182

City McLean State VA Zip Code 22101

Purpose of Disbursement Strategic Planning Consulting, Sebastian Gorka Monthly Payment per contract

Category/Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
09 / 01 / 2017

FEC Identification Number  
C  
Transaction ID : SB21B.4115  
Amount of Each Disbursement this Period  
20000.00

Memo Item

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

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

22650.00

**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)  
**MAGA COALITION, INC.**

Full Name (Last, First, Middle Initial) <b>A. Threat Knowledge Group, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 02 / 2017
Mailing Address 6841 Elm Street # 1182		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4113</b> Amount of Each Disbursement this Period [ ] 20000.00
City McLean	State VA	Zip Code 22101
Purpose of Disbursement Strategic Planning Consulting, Sebastian Gorka Monthly Payment per contact		Category/Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Threat Knowledge Group, LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address 6841 Elm Street # 1182		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4532</b> Amount of Each Disbursement this Period [ ] 20000.00
City McLean	State VA	Zip Code 22101
Purpose of Disbursement Strategic Planning Consulting- Sebastian Gorka monthly payment per contract		Category/Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Titanium Law Group, PLLC</b>		Date of Disbursement MM / DD / YYYY 09 / 27 / 2017
Mailing Address 1629 K Street, N.W.		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4111</b> Amount of Each Disbursement this Period [ ] 10000.00
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Legal Retainer and Legal Consulting		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 50000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ] 133056.42

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

**A.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.5118**  Memo Item  
**Gatto, Sherine, , ,**  
Mailing Address 238 Mohegan Drive

City: Havre de Grace, State: MD, Zip Code: 21078

Purpose of Disbursement: Reimbursement. See below

Activity or Event Identifier: **Administrative**

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 206.00

Date: 09 / 29 / 2017

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		206.00		206.00

**B.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.5119**  Memo Item  
**VistaPrint**  
Mailing Address 275 Wyman Street

City: Waltham, State: MA, Zip Code: 02451

Purpose of Disbursement: Business cards for Todd Wotiz and others

Activity or Event Identifier: Administrative

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 0.00

Date: 09 / 29 / 2017

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		206.00		206.00

**C.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.5125**  Memo Item  
**Gatto, Sherine, , ,**  
Mailing Address 238 Mohegan Drive

City: Havre de Grace, State: MD, Zip Code: 21078

Purpose of Disbursement: Reimbursement for lodging for S. Gatto and others for Palm Coast Fundraiser. See below

Activity or Event Identifier: Administrative

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 799.88

Date: 10 / 26 / 2017

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		593.88		593.88

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		799.88		799.88

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

**A.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.5128**  Memo Item

**Legacy Vacation Resorts**

Mailing Address 98 Palm Coast Resort Blvd.

City Palm Coast State FL Zip Code 32137

Purpose of Disbursement:

Activity or Event Identifier: **Administrative**

Category/Type: 003

Date: 10 / 26 / 2017

Allocated Activity or Event:  Administrative  Fundraising  Exempt  Voter Drive  Direct Candidate Support  Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 0.00

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		593.88		593.88

**B.** Full Name (Last, First, Middle Initial)  Memo Item

Mailing Address

City State Zip Code

Purpose of Disbursement:

Activity or Event Identifier:

Category/Type:

Date:

Allocated Activity or Event:  Administrative  Fundraising  Exempt  Voter Drive  Direct Candidate Support  Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date:

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT

**C.** Full Name (Last, First, Middle Initial)  Memo Item

Mailing Address

City State Zip Code

Purpose of Disbursement:

Activity or Event Identifier:

Category/Type:

Date:

Allocated Activity or Event:  Administrative  Fundraising  Exempt  Voter Drive  Direct Candidate Support  Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date:

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
0.00		799.88		799.88