

# 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**  
**SAVE AMERICA**

ADDRESS (number and street) P.O. BOX 13570  
Check if different than previously reported. (ACC) ARLINGTON VA 22219

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** C00762591 3. IS THIS REPORT NEW (N) OR AMENDED (A)  AMENDED (A)

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

5. Covering Period 08 / 01 / 2022 through 08 / 31 / 2022

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

Signature of Treasurer CRATE, BRADLEY, T, , [Electronically Filed] Date 07 / 31 / 2023

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

**SAVE AMERICA**

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="2022"/>		105445452.02
(b) Cash on Hand at Beginning of Reporting Period.....	99127575.85	
(c) Total Receipts (from Line 19) .....	22805.81	18940101.55
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	99150416.20	124385553.57
7. Total Disbursements (from Line 31).....	6361559.60	31596696.97
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	92788822.06	92788856.60
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**SAVE AMERICA**

Report Covering the Period: From: M M / D D / Y Y Y Y 08 / 01 / 2022 To: M M / D D / Y Y Y Y 08 / 31 / 2022

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).....	2180.05	479585.00
(ii) Unitemized .....	8705.06	57904.74
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	10885.11	537489.74
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	3513855.15
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	10885.11	4051344.89
12. Transfers From Affiliated/Other Party Committees.....	0.00	14876610.46
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).....	70.70	296.20
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	11850.00	11850.00
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)).....▶	22805.81	18940101.55
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	22805.81	18940101.55

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	6196422.28	22854973.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	6196422.28	22854973.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	150000.00	4940000.00
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 .....	137.32	723.97
(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)).....	137.32	723.97
29. Other Disbursements (Including Non-Federal Donations).....	15000.00	3801000.00
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)) ..	6361559.60	31596696.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6361559.60	31596696.97

**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) .....	10885.11	4051344.89
34. Total Contribution Refunds (from Line 28(d)) .....	137.32	723.97
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10747.79	4050620.92
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	6196422.28	22854973.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	70.70	296.20
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6196351.58	22854676.80

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 161
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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)  
**SAVE AMERICA**

**A. WINRED**

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

Mailing Address PO BOX 9891

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
63137.98

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
08		04		2022

**Transaction ID : SA11AI.80928908**

Amount of Each Receipt this Period  
187.25

Memo Item  
**TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED**

**B. CHAPMAN, ANDREA, , ,**

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

Mailing Address 211 IOWA ST

City SANTA ROSA	State CA	Zip Code 95401
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
08		01		2022

**Transaction ID : SA11AI.81664003**

Amount of Each Receipt this Period  
100

Memo Item  
**EARMARKED THROUGH WINRED [SA11AI.80928908]**

**C. PAZ, SINFOROSO, , ,**

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

Mailing Address 4805 BARTLETTS VISION DRIVE

City BOWIE	State MD	Zip Code 20720
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
342

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
08		01		2022

**Transaction ID : SA11AI.81664024**

Amount of Each Receipt this Period  
42.75

Memo Item  
**EARMARKED THROUGH WINRED [SA11AI.80928908]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	142.75
<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 161
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. WINRED**

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

Mailing Address PO BOX 9891

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
63137.98

Date of Receipt  
MM / DD / YYYY  
08 / 05 / 2022

**Transaction ID : SA11AI.80933425**

Amount of Each Receipt this Period  
45.44

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

**B. WINRED**

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

Mailing Address PO BOX 9891

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
63137.98

Date of Receipt  
MM / DD / YYYY  
08 / 08 / 2022

**Transaction ID : SA11AI.80955782**

Amount of Each Receipt this Period  
305.88

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

**C. CHEN, CHIN, , ,**

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

Mailing Address 950 IVY PARKWAY DRIVE

City HOUSTON	State TX	Zip Code 77077
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
760

Date of Receipt  
MM / DD / YYYY  
08 / 03 / 2022

**Transaction ID : SA11AI.81690609**

Amount of Each Receipt this Period  
95

Memo Item  
EARMARKED THROUGH WINRED [SA11AI.80955782]

<b>SUBTOTAL</b> of Receipts This Page (optional).....	95.00
<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 8 OF 161
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

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

Mailing Address 3910 WEST 6TH AVENUE

City STILLWATER	State OK	Zip Code 74074
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNION PACIFIC	Occupation (for Individual) SIGNAL SUPERVISOR
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
342

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		02		2022

**Transaction ID : SA11AI.81690602**

Amount of Each Receipt this Period  
42.75

Memo Item  
EARMARKED THROUGH WINRED [SA11AI.80955782]

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

Mailing Address PO BOX 9891

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

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

Aggregate Year-to-Date ▼  
63137.98

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		09		2022

**Transaction ID : SA11AI.80973717**

Amount of Each Receipt this Period  
140.01

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

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

Mailing Address PO BOX 9891

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

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

Aggregate Year-to-Date ▼  
63137.98

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		10		2022

**Transaction ID : SA11AI.80978400**

Amount of Each Receipt this Period  
144.36

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	42.75
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 161
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. WINRED**

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

Mailing Address PO BOX 9891

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
63137.98

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 11 / 2022

**Transaction ID : SA11AI.80990193**

Amount of Each Receipt this Period  
323.51

Memo Item  
 TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

**B. HERRICK, STEVEN, , ,**

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

Mailing Address 684 MARGARITA AVENUE

City CORONADO	State CA	Zip Code 92118
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 06 / 2022

**Transaction ID : SA11AI.81725075**

Amount of Each Receipt this Period  
47.5

Memo Item  
 EARMARKED THROUGH WINRED [SA11AI.80990193]

**C. WINRED**

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

Mailing Address PO BOX 9891

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
63137.98

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2022

**Transaction ID : SA11AI.81024670**

Amount of Each Receipt this Period  
826.41

Memo Item  
 TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	47.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 161
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

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

Mailing Address 5545 OAKDALE COURT

City LEWIS CENTER	State OH	Zip Code 43035
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) FINANCIAL ADVISOR
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2022

**Transaction ID : SA11AI.81759580**

Amount of Each Receipt this Period  
100

Memo Item  
EARMARKED THROUGH WINRED [SA11AI.81024670]

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

Mailing Address PO BOX 9891

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

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

Aggregate Year-to-Date ▼  
63137.98

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2022

**Transaction ID : SA11AI.81034007**

Amount of Each Receipt this Period  
221.35

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

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

Mailing Address PO BOX 9891

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
63137.98

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2022

**Transaction ID : SA11AI.81058704**

Amount of Each Receipt this Period  
161.51

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

<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 11 OF 161
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. WINRED**

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

Mailing Address PO BOX 9891

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
63137.98

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2022

**Transaction ID : SA11AI.81081080**

Amount of Each Receipt this Period  
270.5

Memo Item  
 TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

**B. CARR, MARIE, , ,**

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

Mailing Address 3673 COCHRAN HWY

City EASTMAN	State GA	Zip Code 31023
-----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		12		2022

**Transaction ID : SA11AI.81816143**

Amount of Each Receipt this Period  
47.5

Memo Item  
 EARMARKED THROUGH WINRED [SA11AI.81081080]

**C. WINRED**

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

Mailing Address PO BOX 9891

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
63137.98

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2022

**Transaction ID : SA11AI.81106658**

Amount of Each Receipt this Period  
683.68

Memo Item  
 TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	47.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 161
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

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

Mailing Address 110 GEMSTONE

City BOERNE	State TX	Zip Code 78006
----------------	-------------	-------------------

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 ▼  
380

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2022

**Transaction ID : SA11AI.81841624**

Amount of Each Receipt this Period  
47.5

Memo Item  
EARMARKED THROUGH WINRED [SA11AI.81106658]

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

Mailing Address PO BOX 193

City BROADWAY	State NC	Zip Code 27505
------------------	-------------	-------------------

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 ▼  
1900

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	13	/	2022

**Transaction ID : SA11AI.81841625**

Amount of Each Receipt this Period  
237.5

Memo Item  
EARMARKED THROUGH WINRED [SA11AI.81106658]

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

Mailing Address PO BOX 9891

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
63137.98

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	19	/	2022

**Transaction ID : SA11AI.81111599**

Amount of Each Receipt this Period  
358.29

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	285.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 161
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

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

Mailing Address 41466 NORTH 109TH PLACE

City SCOTTSDALE	State AZ	Zip Code 85262
--------------------	-------------	-------------------

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 ▼  
356.4

Date of Receipt  
08 / 15 / 2022  
Transaction ID : SA11AI.81846997

Amount of Each Receipt this Period  
44.55

Memo Item  
EARMARKED THROUGH WINRED [SA11AI.81111599]

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

Mailing Address 10871 HARROGATE PLACE

City SANTA ANA	State CA	Zip Code 92705
-------------------	-------------	-------------------

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 ▼  
396

Date of Receipt  
08 / 16 / 2022  
Transaction ID : SA11AI.81846999

Amount of Each Receipt this Period  
49.5

Memo Item  
EARMARKED THROUGH WINRED [SA11AI.81111599]

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

Mailing Address PO BOX 9891

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
63137.98

Date of Receipt  
08 / 22 / 2022  
Transaction ID : SA11AI.81142831

Amount of Each Receipt this Period  
136.33

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	94.05
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 161
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

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

Mailing Address 2125 MAMMATUS DR

City SPARKS	State NV	Zip Code 89441
----------------	-------------	-------------------

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 ▼  
360

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2022

**Transaction ID : SA11AI.81878459**

Amount of Each Receipt this Period  
45

Memo Item  
EARMARKED THROUGH WINRED [SA11AI.81142831]

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

Mailing Address PO BOX 9891

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
63137.98

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	23	/	2022

**Transaction ID : SA11AI.81168915**

Amount of Each Receipt this Period  
284.25

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

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

Mailing Address PO BOX 9891

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
63137.98

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	24	/	2022

**Transaction ID : SA11AI.81194764**

Amount of Each Receipt this Period  
463.95

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 161
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. WINRED**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 9891

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
63137.98

Date of Receipt  
08 / 25 / 2022  
**Transaction ID : SA11AI.81204734**

Amount of Each Receipt this Period  
1534.08

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

**B. NICHOLS, LANE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 2052 VAN HORN COURT

City FAIRBANKS	State AK	Zip Code 99701
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
GENES INC AUTOMOTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400

Date of Receipt  
08 / 22 / 2022  
**Transaction ID : SA11AI.81939911**

Amount of Each Receipt this Period  
50

Memo Item  
EARMARKED THROUGH WINRED [SA11AI.81204734]

**C. POWELL, EVELYN, JO, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1630 CR 219

City BROOKELAND	State TX	Zip Code 75931
--------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
665

Date of Receipt  
08 / 21 / 2022  
**Transaction ID : SA11AI.81939896**

Amount of Each Receipt this Period  
95

Memo Item  
EARMARKED THROUGH WINRED [SA11AI.81204734]

<b>SUBTOTAL</b> of Receipts This Page (optional).....	145.00
<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 161
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

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

Mailing Address 22660 WEST DEERFIELD COURT

City CURTICE	State OH	Zip Code 43412
-----------------	-------------	-------------------

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 ▼  
400

Date of Receipt  
MM / DD / YYYY  
08 / 21 / 2022

**Transaction ID : SA11AI.81939900**

Amount of Each Receipt this Period  
50

Memo Item  
EARMARKED THROUGH WINRED [SA11AI.81204734]

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

Mailing Address PO BOX 9891

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
63137.98

Date of Receipt  
MM / DD / YYYY  
08 / 26 / 2022

**Transaction ID : SA11AI.81207725**

Amount of Each Receipt this Period  
221.69

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

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

Mailing Address 2 POCONO ROAD

City NEWTOWN	State CT	Zip Code 06470
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NATIONAL GUARD	Occupation (for Individual) ATTORNEY
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
400

Date of Receipt  
MM / DD / YYYY  
08 / 23 / 2022

**Transaction ID : SA11AI.81942896**

Amount of Each Receipt this Period  
50

Memo Item  
EARMARKED THROUGH WINRED [SA11AI.81207725]

<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 17 OF 161
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

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

Mailing Address 824 EAST MICHELLE STREET

City WEST COVINA	State CA	Zip Code 91790
---------------------	-------------	-------------------

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

Name of Employer (for Individual) TRI T TECHNOLOGY INC	Occupation (for Individual) ELECTRICIAN
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2022

**Transaction ID : SA11AI.81942895**

Amount of Each Receipt this Period  
47.5

Memo Item  
EARMARKED THROUGH WINRED [SA11AI.81207725]

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

Mailing Address PO BOX 9891

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
63137.98

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

**Transaction ID : SA11AI.81217563**

Amount of Each Receipt this Period  
368.07

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

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

Mailing Address PO BOX 9891

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
63137.98

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

**Transaction ID : SA11AI.81238445**

Amount of Each Receipt this Period  
325.36

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	47.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 OF 161
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. DOTY, SHARON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4810 RISING ST SE  
 City SALEM State OR Zip Code 97302  
 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 ▼ 380

Date of Receipt 08 / 25 / 2022  
**Transaction ID : SA11AI.81973616**  
 Amount of Each Receipt this Period 47.5  
 Memo Item  
 EARMARKED THROUGH WINRED [SA11AI.81238445]

**B. SANDERSON, JOE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8119 NE CATAWBA ROAD  
 City BRECKENRIDGE State MO Zip Code 64625  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350

Date of Receipt 08 / 25 / 2022  
**Transaction ID : SA11AI.81973607**  
 Amount of Each Receipt this Period 50  
 Memo Item  
 EARMARKED THROUGH WINRED [SA11AI.81238445]

**C. SFORZA HUFFMAN, CAROLINA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1656 MIDDLE RD  
 City STROUDSBURG State PA Zip Code 18360  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HNL LABORATORY Occupation (for Individual) PHYSICIAN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 256.5

Date of Receipt 08 / 25 / 2022  
**Transaction ID : SA11AI.81973619**  
 Amount of Each Receipt this Period 42.75  
 Memo Item  
 EARMARKED THROUGH WINRED [SA11AI.81238445]

<b>SUBTOTAL</b> of Receipts This Page (optional).....	140.25
<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 19 OF 161
	<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
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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. SHEPPARD, DENNIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 53285 SILVER VALLEY RD  
 City KELLOGG State ID Zip Code 83837  
 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 ▼ 342

Date of Receipt 08 / 24 / 2022  
**Transaction ID : SA11AI.81973599**  
 Amount of Each Receipt this Period 42.75  
 Memo Item  
 EARMARKED THROUGH WINRED [SA11AI.81238445]

**B. WINRED**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 9891  
 City ARLINGTON State VA Zip Code 22219  
 FEC ID number of contributing federal political committee. **C** C00694323  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 63137.98

Date of Receipt 08 / 31 / 2022  
**Transaction ID : SA11AI.81250992**  
 Amount of Each Receipt this Period 393.65  
 Memo Item  
 TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

**C. MICHAELS, GREGORY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12 WILLIAM PENN CIRCLE  
 City MEDFORD State NJ Zip Code 08055  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) US NAVY Occupation (for Individual) NURSE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400

Date of Receipt 08 / 26 / 2022  
**Transaction ID : SA11AI.81986093**  
 Amount of Each Receipt this Period 50  
 Memo Item  
 EARMARKED THROUGH WINRED [SA11AI.81250992]

<b>SUBTOTAL</b> of Receipts This Page (optional).....	92.75
<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 161
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

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

Mailing Address 6509 BROOK AVE

City BALTIMORE	State MD	Zip Code 21206
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	26	/	2022

**Transaction ID : SA11AI.81986091**

Amount of Each Receipt this Period  
75

Memo Item  
EARMARKED THROUGH WINRED [SA11AI.81250992]

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

Mailing Address PO BOX 9891

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
63137.98

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2022

**Transaction ID : SA11AI.81266991**

Amount of Each Receipt this Period  
566.46

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

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

Mailing Address 4048 ADMIRABLE DRIVE

City RANCHO PALOS VERDES	State CA	Zip Code 90275
-----------------------------	-------------	-------------------

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

Name of Employer (for Individual) STANDARD WIRE CABLE CO	Occupation (for Individual) MANAGEMENT
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
760

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	28	/	2022

**Transaction ID : SA11AI.82002104**

Amount of Each Receipt this Period  
95

Memo Item  
EARMARKED THROUGH WINRED [SA11AI.81266991]

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	170.00
<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 21 OF 161
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

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

Mailing Address 12814 GREAT SAND CT

City HUMBLE	State TX	Zip Code 77346
----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	27	/	2022

**Transaction ID : SA11AI.82002139**

Amount of Each Receipt this Period  
50

Memo Item  
EARMARKED THROUGH WINRED [SA11AI.81266991]

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

Mailing Address PO BOX 9891

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
63137.98

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2022

**Transaction ID : SA11AI.81269798**

Amount of Each Receipt this Period  
656.85

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

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

Mailing Address 6 LINDEN CT

City BETHALTO	State IL	Zip Code 62010
------------------	-------------	-------------------

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

Name of Employer (for Individual) LEISURE WORLD HEALTH CLUB	Occupation (for Individual) PERSONAL TRAINER
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
800

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2022

**Transaction ID : SA11AI.82004832**

Amount of Each Receipt this Period  
100

Memo Item  
EARMARKED THROUGH WINRED [SA11AI.81269798]

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<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 22 OF 161
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. WINRED**

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

Mailing Address PO BOX 9891

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
63137.98

Date of Receipt  
08 / 31 / 2022

**Transaction ID : SA11AI.81272793**

Amount of Each Receipt this Period  
242.22

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

**B. WINRED**

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

Mailing Address PO BOX 9891

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
63137.98

Date of Receipt  
08 / 31 / 2022

**Transaction ID : SA11AI.81282060**

Amount of Each Receipt this Period  
626

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

**C. CHAPMAN, ANDREA, , ,**

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

Mailing Address 211 IOWA ST

City SANTA ROSA	State CA	Zip Code 95401
--------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
800

Date of Receipt  
08 / 31 / 2022

**Transaction ID : SA11AI.82017126**

Amount of Each Receipt this Period  
100

Memo Item  
EARMARKED THROUGH WINRED [SA11AI.81282060]

<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:	PAGE 23 OF 161
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

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

Mailing Address 3118 STERLING ST

City ABILENE	State TX	Zip Code 79606
-----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270

Date of Receipt  
08 / 31 / 2022

Transaction ID : SA11AI.82017123

Amount of Each Receipt this Period  
45

Memo Item  
EARMARKED THROUGH WINRED [SA11AI.81282060]

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

Mailing Address 3853 BETTY JEAN COURT

City LILBURN	State GA	Zip Code 30047
-----------------	-------------	-------------------

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

Name of Employer (for Individual) US DEPARTMENT OF HUD	Occupation (for Individual) SR SF HSG SPECIALIST
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250

Date of Receipt  
08 / 31 / 2022

Transaction ID : SA11AI.82017127

Amount of Each Receipt this Period  
250

Memo Item  
EARMARKED THROUGH WINRED [SA11AI.81282060]

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

Mailing Address 129 LOCUST CT

City FLEMINGTON	State NJ	Zip Code 08822
--------------------	-------------	-------------------

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

Name of Employer (for Individual) TOWN OF HARRISON	Occupation (for Individual) POLICE OFFICER
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
237

Date of Receipt  
08 / 29 / 2022

Transaction ID : SA11AI.81986120

Amount of Each Receipt this Period  
5

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<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 161
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. YANUZZI, JOHN, J, , JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 129 LOCUST CT  
 City FLEMINGTON State NJ Zip Code 08822  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TOWN OF HARRISON Occupation (for Individual) POLICE OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **237**

Date of Receipt **08 / 18 / 2022**  
**Transaction ID : SA11AI.81849360**  
 Amount of Each Receipt this Period **5**  
 Memo Item

**B. YANUZZI, JOHN, J, , JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 129 LOCUST CT  
 City FLEMINGTON State NJ Zip Code 08822  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TOWN OF HARRISON Occupation (for Individual) POLICE OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **237**

Date of Receipt **08 / 18 / 2022**  
**Transaction ID : SA11AI.81849368**  
 Amount of Each Receipt this Period **5**  
 Memo Item

**C. YANUZZI, JOHN, J, , JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 129 LOCUST CT  
 City FLEMINGTON State NJ Zip Code 08822  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TOWN OF HARRISON Occupation (for Individual) POLICE OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **237**

Date of Receipt **08 / 12 / 2022**  
**Transaction ID : SA11AI.81769053**  
 Amount of Each Receipt this Period **5**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>15.00</b>
<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 161
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. YANUZZI, JOHN, J, , JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 129 LOCUST CT

City FLEMINGTON	State NJ	Zip Code 08822
--------------------	-------------	-------------------

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

Name of Employer (for Individual) TOWN OF HARRISON	Occupation (for Individual) POLICE OFFICER
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
237

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 04 / 2022

**Transaction ID : SA11AI.81708492**

Amount of Each Receipt this Period  
5

Memo Item

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

Mailing Address 129 LOCUST CT

City FLEMINGTON	State NJ	Zip Code 08822
--------------------	-------------	-------------------

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

Name of Employer (for Individual) TOWN OF HARRISON	Occupation (for Individual) POLICE OFFICER
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
237

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 18 / 2022

**Transaction ID : SA11AI.81849369**

Amount of Each Receipt this Period  
5

Memo Item

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

Mailing Address 129 LOCUST CT

City FLEMINGTON	State NJ	Zip Code 08822
--------------------	-------------	-------------------

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

Name of Employer (for Individual) TOWN OF HARRISON	Occupation (for Individual) POLICE OFFICER
---	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
237

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 24 / 2022

**Transaction ID : SA11AI.81986116**

Amount of Each Receipt this Period  
5

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15.00
<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 26 OF 161  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
YANUZZI, JOHN, J, , JR

Mailing Address 129 LOCUST CT

City FLEMINGTON    State NJ    Zip Code 08822

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

Name of Employer (for Individual) TOWN OF HARRISON    Occupation (for Individual) POLICE OFFICER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
237

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2022

**Transaction ID : SA11AI.81648042**

Amount of Each Receipt this Period  
5

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 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 Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2180.05

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 161
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. AMERICAN EXPRESS**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 200 VESEY ST  
City NEW YORK State NY Zip Code 10285  
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 ▼ 270

Date of Receipt 08 / 08 / 2022  
**Transaction ID : SA15.1**  
Amount of Each Receipt this Period 65  
 Memo Item  
VENDOR REFUND: OVERPAYMENT

**B. WINRED TECHNICAL SERVICES LLC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1776 WILSON BLVD SUITE 530  
City ARLINGTON State VA Zip Code 22219  
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 ▼ 5.7

Date of Receipt 08 / 04 / 2022  
**Transaction ID : SA15.2**  
Amount of Each Receipt this Period 5.7  
 Memo Item  
VENDOR REFUND: OVERPAYMENT

**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)

Date of Receipt  
Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	70.70
<b>TOTAL</b> This Period (last page this line number only).....	70.70

**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 161
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. FRIENDS OF MATT MADDOCK FOR STATE REP**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1150 SOUTH MILFORD RD

City MILFORD	State MI	Zip Code 48381
-----------------	-------------	-------------------

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 ▼  
3950

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2022

**Transaction ID : SA17.81761039**

Amount of Each Receipt this Period  
3950

Memo Item  
REFUND OF NON-FEDERAL CONTRIBUTION

**B. COMMITTEE TO ELECT JACKY EUBANKS**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 34396 DANTE DR

City CHESTERFIELD	State MI	Zip Code 48047
----------------------	-------------	-------------------

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 ▼  
3950

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2022

**Transaction ID : SA17.81794343**

Amount of Each Receipt this Period  
3950

Memo Item  
REFUND OF NON-FEDERAL CONTRIBUTION

**C. COMMITTEE TO ELECT RACHELLE SMIT FOR STATE REPRESENTATIVE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 124

City SHELBYVILLE	State MI	Zip Code 49344
---------------------	-------------	-------------------

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 ▼  
3950

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

**Transaction ID : SA17.81985994**

Amount of Each Receipt this Period  
3950

Memo Item  
REFUND OF NON-FEDERAL CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11850.00
<b>TOTAL</b> This Period (last page this line number only).....	11850.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. ABEL BEAN LAW P.A.**

Full Name (Last, First, Middle Initial)

Mailing Address 100 N. LAURA STREET  
SUITE 501

City JACKSONVILLE State FL Zip Code 32202

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 24 / 2022

FEC Identification Number: C

Transaction ID : **SB21B.90560**

Amount of Each Disbursement this Period: 5000

Memo Item

**B. ACE SPECIALTIES, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 80427

City LAFAYETTE State LA Zip Code 70598

Purpose of Disbursement COLLATERAL: CAPS & FREIGHT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 04 / 2022

FEC Identification Number: C

Transaction ID : **SB21B.90042**

Amount of Each Disbursement this Period: 198.62

Memo Item

**C. ACE SPECIALTIES, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 80427

City LAFAYETTE State LA Zip Code 70598

Purpose of Disbursement COLLATERAL: CAPS, SHIRTS, PENS, & FREIGHT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 11 / 2022

FEC Identification Number: C

Transaction ID : **SB21B.90195**

Amount of Each Disbursement this Period: 72202.11

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 77400.73

**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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. ACE SPECIALTIES, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2022	
Mailing Address PO BOX 80427		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90417</b>	
City LAFAYETTE	State LA	Zip Code 70598	Amount of Each Disbursement this Period [REDACTED] 4198.5
Purpose of Disbursement COLLATERAL: CAPS & FREIGHT		Category/Type [REDACTED]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. ACE SPECIALTIES, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 25 / 2022	
Mailing Address PO BOX 80427		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90363</b>	
City LAFAYETTE	State LA	Zip Code 70598	Amount of Each Disbursement this Period [REDACTED] 3487.61
Purpose of Disbursement COLLATERAL: BUTTONS, CAPS, & FREIGHT		Category/Type [REDACTED]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. ACUMEN SOLUTIONS GROUP LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 04 / 2022	
Mailing Address 600 BROADHOLLOW ROAD SUITE 200		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90146</b>	
City MELVILLE	State NY	Zip Code 11747	Amount of Each Disbursement this Period [REDACTED] 2500
Purpose of Disbursement INSURANCE		Category/Type [REDACTED]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

[REDACTED] 10186.11

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

[REDACTED]



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. AMERICAN AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 19 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period: 748.67

Memo Item

**B. AMERICAN AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement CREDIT: TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 15 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period: - 446.85

Memo Item

**C. AMERICAN AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 13 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period: 211.46

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>		Date of Disbursement MM / DD / YYYY 07 / 11 / 2022
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90203</b> Amount of Each Disbursement this Period [ ] 719.78
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL: AIR		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. AMERICAN AIRLINES</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2022
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90203</b> Amount of Each Disbursement this Period [ ] 364.32
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL: AIR		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. AMERICAN AIRLINES</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2022
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90203</b> Amount of Each Disbursement this Period [ ] 314.91
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL: AIR		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

[ ] 0.00

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

[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. AMERICAN AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 06 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period: 459.99

Memo Item

**B. AMERICAN AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 06 / 29 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period: 867.57

Memo Item

**C. AMERICAN AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 06 / 29 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period: 329.74

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2022
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90203</b> Amount of Each Disbursement this Period [ ] 767.4
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL: AIR		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. AMTRAK</b>		Date of Disbursement MM / DD / YYYY 06 / 29 / 2022
Mailing Address 60 MASSACHUSETTS AVE NE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90203</b> Amount of Each Disbursement this Period [ ] 113
City WASHINGTON	State DC	Zip Code 20002
Purpose of Disbursement TRAVEL: RAIL		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. BLOOMBERG LP</b>		Date of Disbursement MM / DD / YYYY 07 / 17 / 2022
Mailing Address 731 LEXINGTON AVENUE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90203</b> Amount of Each Disbursement this Period [ ] 34.99
City NEW YORK	State NY	Zip Code 10022
Purpose of Disbursement SUBSCRIPTIONS		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

## A. BUSINESS INSIDER

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address **ONE LIBERTY STREET  
8TH FLOOR**

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

City **NEW YORK** State **NY** Zip Code **10006**

FEC Identification Number

Purpose of Disbursement  
**SUBSCRIPTIONS**

**C**

**Transaction ID : SB21B.90203**  
Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

**99**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

## B. CAPTAIN COOK HOTEL

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address **939 W 5TH AVE**

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

City **ANCHORAGE** State **AK** Zip Code **99501**

FEC Identification Number

Purpose of Disbursement  
**TRAVEL: LODGING**

**C**

**Transaction ID : SB21B.90203**  
Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

**4877.6**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

## C. CVS PHARMACY

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address **ONE CVS DRIVE**

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

City **WOONSOCKET** State **RI** Zip Code **02895**

FEC Identification Number

Purpose of Disbursement  
**OFFICE SUPPLIES**

**C**

**Transaction ID : SB21B.90203**  
Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

**6.4**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

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

**0.00**

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. CVS PHARMACY</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2022	
Mailing Address ONE CVS DRIVE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90203</b> Amount of Each Disbursement this Period [REDACTED] 49.09	
City WOONSOCKET	State RI	Zip Code 02895	Category/ Type [REDACTED]
Purpose of Disbursement OFFICE SUPPLIES		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) ▼		<input checked="" type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>B. CVS PHARMACY</b>		Date of Disbursement MM / DD / YYYY 07 / 14 / 2022	
Mailing Address ONE CVS DRIVE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90203</b> Amount of Each Disbursement this Period [REDACTED] 8.54	
City WOONSOCKET	State RI	Zip Code 02895	Category/ Type [REDACTED]
Purpose of Disbursement OFFICE SUPPLIES		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) ▼		<input checked="" type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>C. CVS PHARMACY</b>		Date of Disbursement MM / DD / YYYY 07 / 14 / 2022	
Mailing Address ONE CVS DRIVE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90203</b> Amount of Each Disbursement this Period [REDACTED] 3.85	
City WOONSOCKET	State RI	Zip Code 02895	Category/ Type [REDACTED]
Purpose of Disbursement OFFICE SUPPLIES		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) ▼		<input checked="" type="checkbox"/> Memo Item
State: District:			

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. CVS PHARMACY</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2022
Mailing Address ONE CVS DRIVE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90203</b> Amount of Each Disbursement this Period [REDACTED] 10.25
City WOONSOCKET	State RI	Zip Code 02895
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CVS PHARMACY</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2022
Mailing Address ONE CVS DRIVE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90203</b> Amount of Each Disbursement this Period [REDACTED] 4.06
City WOONSOCKET	State RI	Zip Code 02895
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CVS PHARMACY</b>		Date of Disbursement MM / DD / YYYY 07 / 10 / 2022
Mailing Address ONE CVS DRIVE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90203</b> Amount of Each Disbursement this Period [REDACTED] 39.5
City WOONSOCKET	State RI	Zip Code 02895
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

[REDACTED] 0.00
[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. DELTA AIRLINES</b>		Date of Disbursement MM / DD / YYYY 07 / 22 / 2022
Mailing Address 1030 DELTA BLVD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90203</b> Amount of Each Disbursement this Period [ ] 75.44
City ATLANTA	State GA	Zip Code 30354
Purpose of Disbursement TRAVEL: AIR		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. DELTA AIRLINES</b>		Date of Disbursement MM / DD / YYYY 07 / 21 / 2022
Mailing Address 1030 DELTA BLVD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90203</b> Amount of Each Disbursement this Period [ ] 255.91
City ATLANTA	State GA	Zip Code 30354
Purpose of Disbursement TRAVEL: AIR		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. DELTA AIRLINES</b>		Date of Disbursement MM / DD / YYYY 07 / 21 / 2022
Mailing Address 1030 DELTA BLVD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90203</b> Amount of Each Disbursement this Period [ ] 265.4
City ATLANTA	State GA	Zip Code 30354
Purpose of Disbursement TRAVEL: AIR		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**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: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 18 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period: 273

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 TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 18 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period: 273

Memo Item

**C. DELTA AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 14 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period: 227.4

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. DELTA AIRLINES</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2022
Mailing Address 1030 DELTA BLVD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90203</b> Amount of Each Disbursement this Period [ ] 274.9
City ATLANTA	State GA	Zip Code 30354
Purpose of Disbursement TRAVEL: AIR		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. DELTA AIRLINES</b>		Date of Disbursement MM / DD / YYYY 07 / 04 / 2022
Mailing Address 1030 DELTA BLVD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90203</b> Amount of Each Disbursement this Period [ ] 539.43
City ATLANTA	State GA	Zip Code 30354
Purpose of Disbursement TRAVEL: AIR		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. DELTA AIRLINES</b>		Date of Disbursement MM / DD / YYYY 06 / 29 / 2022
Mailing Address 1030 DELTA BLVD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90203</b> Amount of Each Disbursement this Period [ ] 416
City ATLANTA	State GA	Zip Code 30354
Purpose of Disbursement TRAVEL: AIR		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)  
**A. ENTERPRISE RENT A CAR**

Mailing Address 600 CORPORATE PARK DRIVE

City ST LOUIS State MO Zip Code 63105

Purpose of Disbursement TRAVEL: CAR RENTAL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 13 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period: 3868.68

Memo Item

Full Name (Last, First, Middle Initial)  
**B. ENTERPRISE RENT A CAR**

Mailing Address 600 CORPORATE PARK DRIVE

City ST LOUIS State MO Zip Code 63105

Purpose of Disbursement TRAVEL: CAR RENTAL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 23 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period: 790.88

Memo Item

Full Name (Last, First, Middle Initial)  
**C. ENTERPRISE RENT A CAR**

Mailing Address 600 CORPORATE PARK DRIVE

City ST LOUIS State MO Zip Code 63105

Purpose of Disbursement TRAVEL: CAR RENTAL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 08 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period: 675.33

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)  
**A. ENTERPRISE RENT A CAR**

Mailing Address **600 CORPORATE PARK DRIVE**

City **ST LOUIS** State **MO** Zip Code **63105**

Purpose of Disbursement  
**TRAVEL: CAR RENTAL**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: **07 / 07 / 2022**

FEC Identification Number: **C**  
**Transaction ID : SB21B.90203**  
Amount of Each Disbursement this Period: **526.46**

Memo Item

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

Mailing Address **333 108TH AVENUE**

City **BELLEVUE** State **WA** Zip Code **98004**

Purpose of Disbursement  
**TRAVEL: LODGING**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: **07 / 01 / 2022**

FEC Identification Number: **C**  
**Transaction ID : SB21B.90203**  
Amount of Each Disbursement this Period: **1218.28**

Memo Item

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

Mailing Address **333 108TH AVENUE**

City **BELLEVUE** State **WA** Zip Code **98004**

Purpose of Disbursement  
**TRAVEL: LODGING**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: **07 / 21 / 2022**

FEC Identification Number: **C**  
**Transaction ID : SB21B.90203**  
Amount of Each Disbursement this Period: **85.3**

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ **0.00**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)

**A. EXPEDIA**

Mailing Address 333 108TH AVENUE

City  
BELLEVUE

State  
WA

Zip Code  
98004

Purpose of Disbursement  
TRAVEL: LODGING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period

[REDACTED] 1212.76

Memo Item

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE ROAD

City  
MEMPHIS

State  
TN

Zip Code  
38120

Purpose of Disbursement  
DELIVERY SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period

[REDACTED] 18.09

Memo Item

Full Name (Last, First, Middle Initial)

**C. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE ROAD

City  
MEMPHIS

State  
TN

Zip Code  
38120

Purpose of Disbursement  
DELIVERY SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period

[REDACTED] 103.84

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)

**A. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE ROAD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement DELIVERY SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 18 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.90203  
Amount of Each Disbursement this Period  
173.01

Memo Item

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE ROAD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement DELIVERY SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 09 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.90203  
Amount of Each Disbursement this Period  
18.28

Memo Item

Full Name (Last, First, Middle Initial)

**C. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE ROAD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement DELIVERY SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 02 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.90203  
Amount of Each Disbursement this Period  
29.49

Memo Item

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

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

0.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

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

Date of Disbursement: MM / DD / YYYY  
07 / 23 / 2022

Mailing Address 942 SOUTH SHADY GROVE ROAD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement DELIVERY SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C  
Transaction ID : SB21B.90203  
Amount of Each Disbursement this Period: 14.29

Memo Item

Full Name (Last, First, Middle Initial)  
**B. GANNETT NEWSPAPER**

Date of Disbursement: MM / DD / YYYY  
07 / 25 / 2022

Mailing Address 7950 JONES BRANCH DR

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C  
Transaction ID : SB21B.90203  
Amount of Each Disbursement this Period: 9.99

Memo Item

Full Name (Last, First, Middle Initial)  
**C. MAHOGANY RIDGE GLOBAL SERVICES**

Date of Disbursement: MM / DD / YYYY  
07 / 26 / 2022

Mailing Address 51 GRETNA WOODS RD

City PLEASANT VALLEY State NY Zip Code 12569

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C  
Transaction ID : SB21B.90203  
Amount of Each Disbursement this Period: 272.02

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)  
**A. MAHOGANY RIDGE GLOBAL SERVICES**

Mailing Address 51 GRETNA WOODS RD

City PLEASANT VALLEY State NY Zip Code 12569

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 25 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period: 272.02

Memo Item

Full Name (Last, First, Middle Initial)  
**B. MAHOGANY RIDGE GLOBAL SERVICES**

Mailing Address 51 GRETNA WOODS RD

City PLEASANT VALLEY State NY Zip Code 12569

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 24 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period: 385.95

Memo Item

Full Name (Last, First, Middle Initial)  
**C. MAHOGANY RIDGE GLOBAL SERVICES**

Mailing Address 51 GRETNA WOODS RD

City PLEASANT VALLEY State NY Zip Code 12569

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 21 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period: 272.02

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

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

Date of Disbursement

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

Mailing Address 10400 FERNWOOD RD

FEC Identification Number

C

**Transaction ID : SB21B.90203**  
Amount of Each Disbursement this Period

699.21

Memo Item

City **BETHESDA** State **MD** Zip Code **20817**

Purpose of Disbursement  
TRAVEL: LODGING

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)  
**B. MARRIOTT INTERNATIONAL**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	2

Mailing Address 10400 FERNWOOD RD

FEC Identification Number

C

**Transaction ID : SB21B.90203**  
Amount of Each Disbursement this Period

637.31

Memo Item

City **BETHESDA** State **MD** Zip Code **20817**

Purpose of Disbursement  
TRAVEL: LODGING

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	2

Mailing Address 10400 FERNWOOD RD

FEC Identification Number

C

**Transaction ID : SB21B.90203**  
Amount of Each Disbursement this Period

1516.48

Memo Item

City **BETHESDA** State **MD** Zip Code **20817**

Purpose of Disbursement  
TRAVEL: LODGING

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

0.00

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. MARRIOTT INTERNATIONAL</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2022	
Mailing Address 10400 FERNWOOD RD		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90203</b> Amount of Each Disbursement this Period [REDACTED] 1083.2	
City BETHESDA	State MD	Zip Code 20817	Category/ Type [REDACTED]
Purpose of Disbursement TRAVEL: LODGING		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) ▼		<input checked="" type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>B. MARRIOTT INTERNATIONAL</b>		Date of Disbursement MM / DD / YYYY 07 / 15 / 2022	
Mailing Address 10400 FERNWOOD RD		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90203</b> Amount of Each Disbursement this Period [REDACTED] 708.38	
City BETHESDA	State MD	Zip Code 20817	Category/ Type [REDACTED]
Purpose of Disbursement TRAVEL: LODGING		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) ▼		<input checked="" type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>C. MARRIOTT INTERNATIONAL</b>		Date of Disbursement MM / DD / YYYY 07 / 10 / 2022	
Mailing Address 10400 FERNWOOD RD		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90203</b> Amount of Each Disbursement this Period [REDACTED] 593.75	
City BETHESDA	State MD	Zip Code 20817	Category/ Type [REDACTED]
Purpose of Disbursement TRAVEL: LODGING		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) ▼		<input checked="" type="checkbox"/> Memo Item
State: District:			

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

### A. MARRIOTT INTERNATIONAL

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 10400 FERNWOOD RD

M M M	/	D D D	/	Y Y Y Y Y
07		08		2022

City BETHESDA State MD Zip Code 20817

FEC Identification Number

Purpose of Disbursement  
TRAVEL: LODGING

C
---

Candidate Name

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

604.36
--------

State: District:

Memo Item

### B. MARRIOTT INTERNATIONAL

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 10400 FERNWOOD RD

M M M	/	D D D	/	Y Y Y Y Y
07		08		2022

City BETHESDA State MD Zip Code 20817

FEC Identification Number

Purpose of Disbursement  
TRAVEL: LODGING

C
---

Candidate Name

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

1209.28
---------

State: District:

Memo Item

### C. MARRIOTT INTERNATIONAL

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 10400 FERNWOOD RD

M M M	/	D D D	/	Y Y Y Y Y
07		08		2022

City BETHESDA State MD Zip Code 20817

FEC Identification Number

Purpose of Disbursement  
TRAVEL: LODGING

C
---

Candidate Name

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

764.54
--------

State: District:

Memo Item

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

0.00
------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

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

Date of Disbursement

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

Mailing Address 10400 FERNWOOD RD

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.90203**  
 Amount of Each Disbursement this Period  
 [ ] 958.28

City BETHESDA State MD Zip Code 20817

Purpose of Disbursement  
TRAVEL: LODGING

[ ]  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)  
**B. MARRIOTT INTERNATIONAL**

Date of Disbursement

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

Mailing Address 10400 FERNWOOD RD

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.90203**  
 Amount of Each Disbursement this Period  
 [ ] 680.5

City BETHESDA State MD Zip Code 20817

Purpose of Disbursement  
TRAVEL: LODGING

[ ]  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

State: District:

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

Date of Disbursement

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

Mailing Address 6600 NORTH MILITARY TRAIL

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.90203**  
 Amount of Each Disbursement this Period  
 [ ] 37.39

City BOCA RATON State FL Zip Code 33496

Purpose of Disbursement  
OFFICE SUPPLIES

[ ]  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

State: District:

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

[ ] 0.00

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

[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)

**A. OFFICE DEPOT**

Mailing Address 6600 NORTH MILITARY TRAIL

City  
BOCA RATON

State  
FL

Zip Code  
33496

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.90203  
Amount of Each Disbursement this Period

[REDACTED] 66.09

Memo Item

Full Name (Last, First, Middle Initial)

**B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City  
DALLAS

State  
TX

Zip Code  
75235

Purpose of Disbursement  
TRAVEL: AIR

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.90203  
Amount of Each Disbursement this Period

[REDACTED] 477.96

Memo Item

Full Name (Last, First, Middle Initial)

**C. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City  
DALLAS

State  
TX

Zip Code  
75235

Purpose of Disbursement  
TRAVEL: AIR

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.90203  
Amount of Each Disbursement this Period

[REDACTED] 451.95

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)

### A. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City  
DALLAS

State  
TX

Zip Code  
75235

Purpose of Disbursement  
TRAVEL: AIR

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period

[REDACTED] 180.48

Memo Item

Full Name (Last, First, Middle Initial)

### B. STERICYCLE INC

Mailing Address 28161 N KEITH DR

City  
LAKE FOREST

State  
IL

Zip Code  
60045

Purpose of Disbursement  
OFFICE EQUIPMENT

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	2	2		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period

[REDACTED] 577.6

Memo Item

Full Name (Last, First, Middle Initial)

### C. TATANGO INC

Mailing Address 600 STEWARD ST  
SUITE 400

City  
SEATTLE

State  
WA

Zip Code  
98101

Purpose of Disbursement  
SMS ADVERTISING

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:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period

[REDACTED] 1500

Memo Item

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

[REDACTED] 0.00

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

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)  
**A. THE EPOCH TIMES ASSOCIATION**

Mailing Address 229 W 28TH ST

City NEW YORK State NY Zip Code 10001

Purpose of Disbursement SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 17 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period: 9.99

Memo Item

Full Name (Last, First, Middle Initial)  
**B. THE FINANCIAL TIMES LIMITED**

Mailing Address 330 HUDSON ST  
8TH FL

City NEW YORK State NY Zip Code 10013

Purpose of Disbursement SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 17 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period: 40

Memo Item

Full Name (Last, First, Middle Initial)  
**C. NEW YORK TIMES**

Mailing Address 620 8TH AVE

City NEW YORK State NY Zip Code 10018

Purpose of Disbursement SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 12 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period: 17

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)  
**A. THE WASHINGTON TIMES LLC**

Mailing Address 3600 NEW YORK AVENUE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement SUBSCRIPTIONS

Candidate Name

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

State: District:

Date of Disbursement: 07 / 02 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period: 74.99

Memo Item

Full Name (Last, First, Middle Initial)  
**B. TRUMP HOTEL COLLECTION**

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement TRAVEL: LODGING

Candidate Name

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

State: District:

Date of Disbursement: 07 / 21 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period: 1952.19

Memo Item

Full Name (Last, First, Middle Initial)  
**C. TRUMP HOTEL COLLECTION**

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement TRAVEL: LODGING

Candidate Name

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

State: District:

Date of Disbursement: 07 / 20 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period: 6995.62

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)

## A. TRUMP HOTEL COLLECTION

Mailing Address 725 FIFTH AVENUE

City  
NEW YORK

State  
NY

Zip Code  
10022

Purpose of Disbursement  
TRAVEL: LODGING

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:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period

11779

Memo Item

Full Name (Last, First, Middle Initial)

## B. UBER

Mailing Address 1455 MARKET STREET  
#400

City  
SAN FRANCISCO

State  
CA

Zip Code  
94103

Purpose of Disbursement  
TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period

35.39

Memo Item

Full Name (Last, First, Middle Initial)

## C. UBER

Mailing Address 1455 MARKET STREET  
#400

City  
SAN FRANCISCO

State  
CA

Zip Code  
94103

Purpose of Disbursement  
TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period

72.87

Memo Item

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

0.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)

**A. UBER**

Mailing Address 1455 MARKET STREET  
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement  
TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 20 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.90203  
Amount of Each Disbursement this Period  
53.68

Memo Item

Full Name (Last, First, Middle Initial)

**B. UNITED AIRLINES**

Mailing Address 233 S WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 19 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.90203  
Amount of Each Disbursement this Period  
218.95

Memo Item

Full Name (Last, First, Middle Initial)

**C. UNITED AIRLINES**

Mailing Address 233 S WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 18 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.90203  
Amount of Each Disbursement this Period  
471.4

Memo Item

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

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

0.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. UNITED AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 233 S WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement CREDIT: TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 07 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period: - 291.95

Memo Item

**B. UNITED AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 233 S WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 06 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period: 531.57

Memo Item

**C. UNITED AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 233 S WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 06 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period: 410.53

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. UNITED AIRLINES</b>		Date of Disbursement MM / DD / YYYY 07 / 05 / 2022
Mailing Address 233 S WACKER DRIVE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90203</b> Amount of Each Disbursement this Period [REDACTED] 522.44
City CHICAGO	State IL	Zip Code 60606
Purpose of Disbursement TRAVEL: AIR		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. UNITED AIRLINES</b>		Date of Disbursement MM / DD / YYYY 07 / 05 / 2022
Mailing Address 233 S WACKER DRIVE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90203</b> Amount of Each Disbursement this Period [REDACTED] 291.95
City CHICAGO	State IL	Zip Code 60606
Purpose of Disbursement TRAVEL: AIR		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. UNITED AIRLINES</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2022
Mailing Address 233 S WACKER DRIVE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90203</b> Amount of Each Disbursement this Period [REDACTED] 415.02
City CHICAGO	State IL	Zip Code 60606
Purpose of Disbursement TRAVEL: AIR		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

[REDACTED] 0.00

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

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. UNITED AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 233 S WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 20 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period: 562.32

Memo Item

**B. WALL ST JOURNAL**

Full Name (Last, First, Middle Initial)

Mailing Address 1211 AVENUE OF THE AMERICAS

City NEW YORK State NY Zip Code 10036

Purpose of Disbursement SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 18 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90203

Amount of Each Disbursement this Period: 38.99

Memo Item

**C. AMERICAN EXPRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 200 VESEY ST

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement CREDIT CARD PAYMENT: SEE ITEMIZATIONS IF REQUIRED

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 22 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period: 47392.72

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 47392.72

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)

**A. ADOBE**

Mailing Address 151 S ALMADEN BLVD

City  
SAN JOSE

State  
CA

Zip Code  
95838

Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C**

**Transaction ID : SB21B.90697**

Amount of Each Disbursement this Period

1	8	0	0	0	0
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**B. AMAZON**

Mailing Address 440 TERRY AVE. NORTH

City  
SEATTLE

State  
WA

Zip Code  
98109

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C**

**Transaction ID : SB21B.90697**

Amount of Each Disbursement this Period

5	1	0	9	0	0
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C. AMAZON**

Mailing Address 440 TERRY AVE. NORTH

City  
SEATTLE

State  
WA

Zip Code  
98109

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C**

**Transaction ID : SB21B.90697**

Amount of Each Disbursement this Period

3	7	4	4	9	6
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Memo Item

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

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

0	0	0	0	0	0
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0	0	0	0	0	0
---	---	---	---	---	---

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. AMERICAN AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 17 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period: 307.6

Memo Item

**B. AMERICAN AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 16 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period: 415.66

Memo Item

**C. AMERICAN AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 06 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period: 29.97

Memo Item

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

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

0.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. AMERICAN AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 06 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period: 414.17

Memo Item

**B. AMERICAN AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 05 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period: 618.2

Memo Item

**C. AMERICAN AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 31 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period: 92.35

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. AMERICAN AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 31 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period: 308.29

Memo Item

**B. BLOOMBERG LP**

Full Name (Last, First, Middle Initial)

Mailing Address 731 LEXINGTON AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 17 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period: 34.99

Memo Item

**C. CVS PHARMACY**

Full Name (Last, First, Middle Initial)

Mailing Address ONE CVS DRIVE

City WOONSOCKET State RI Zip Code 02895

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 28 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period: 4.27

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. CVS PHARMACY**

Full Name (Last, First, Middle Initial)

Mailing Address ONE CVS DRIVE

City WOONSOCKET State RI Zip Code 02895

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 18 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period: 20.8

Memo Item

**B. CVS PHARMACY**

Full Name (Last, First, Middle Initial)

Mailing Address ONE CVS DRIVE

City WOONSOCKET State RI Zip Code 02895

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 04 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period: 10.25

Memo Item

**C. CVS PHARMACY**

Full Name (Last, First, Middle Initial)

Mailing Address ONE CVS DRIVE

City WOONSOCKET State RI Zip Code 02895

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 02 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period: 20.49

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)

### A. DELTA AIRLINES

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
TRAVEL: AIR

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period

[REDACTED]	298.51
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

### B. DELTA AIRLINES

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
TRAVEL: AIR

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period

[REDACTED]	298.51
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

### C. DELTA AIRLINES

Mailing Address 1030 DELTA BLVD

City  
ATLANTA

State  
GA

Zip Code  
30354

Purpose of Disbursement  
TRAVEL: AIR

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period

[REDACTED]	315.2
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Memo Item

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

[REDACTED]	0.00
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TOTAL This Period (last page this line number only)..... ▶

[REDACTED]	
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. DELTA AIRLINES</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2022	
Mailing Address 1030 DELTA BLVD		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90697</b> Amount of Each Disbursement this Period [REDACTED] 310.7	
City ATLANTA	State GA	Zip Code 30354	Category/ Type [REDACTED]
Purpose of Disbursement TRAVEL: AIR		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. DELTA AIRLINES</b>		Date of Disbursement MM / DD / YYYY 08 / 15 / 2022	
Mailing Address 1030 DELTA BLVD		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90697</b> Amount of Each Disbursement this Period [REDACTED] 350.21	
City ATLANTA	State GA	Zip Code 30354	Category/ Type [REDACTED]
Purpose of Disbursement TRAVEL: AIR		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. DELTA AIRLINES</b>		Date of Disbursement MM / DD / YYYY 08 / 11 / 2022	
Mailing Address 1030 DELTA BLVD		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90697</b> Amount of Each Disbursement this Period [REDACTED] 33.25	
City ATLANTA	State GA	Zip Code 30354	Category/ Type [REDACTED]
Purpose of Disbursement TRAVEL: AIR		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**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: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 08 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period: 559.3

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 TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 03 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period: 232.15

Memo Item

**C. DELTA AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 22 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period: 317.32

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**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: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 22 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period: 230.5

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 TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 22 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period: 230.5

Memo Item

**C. ENTERPRISE RENT A CAR**

Full Name (Last, First, Middle Initial)

Mailing Address 600 CORPORATE PARK DRIVE

City ST LOUIS State MO Zip Code 63105

Purpose of Disbursement TRAVEL: CAR RENTAL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 16 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period: 3775.38

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)  
**A. ENTERPRISE RENT A CAR**

Mailing Address 600 CORPORATE PARK DRIVE

City ST LOUIS State MO Zip Code 63105

Purpose of Disbursement TRAVEL: CAR RENTAL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 19 / 2022

FEC Identification Number: C  
Transaction ID : SB21B.90697  
Amount of Each Disbursement this Period: 675.62

Memo Item

Full Name (Last, First, Middle Initial)  
**B. ENTERPRISE RENT A CAR**

Mailing Address 600 CORPORATE PARK DRIVE

City ST LOUIS State MO Zip Code 63105

Purpose of Disbursement TRAVEL: CAR RENTAL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 16 / 2022

FEC Identification Number: C  
Transaction ID : SB21B.90697  
Amount of Each Disbursement this Period: 2100.53

Memo Item

Full Name (Last, First, Middle Initial)  
**C. ENTERPRISE RENT A CAR**

Mailing Address 600 CORPORATE PARK DRIVE

City ST LOUIS State MO Zip Code 63105

Purpose of Disbursement TRAVEL: CAR RENTAL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 12 / 2022

FEC Identification Number: C  
Transaction ID : SB21B.90697  
Amount of Each Disbursement this Period: 783.23

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. ENTERPRISE RENT A CAR</b>		Date of Disbursement MM / DD / YYYY 08 / 05 / 2022
Mailing Address 600 CORPORATE PARK DRIVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90697</b>
City ST LOUIS	State MO	Zip Code 63105
Purpose of Disbursement TRAVEL: CAR RENTAL		Amount of Each Disbursement this Period [ ] 1351.81
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. EXPEDIA INC</b>		Date of Disbursement MM / DD / YYYY 08 / 02 / 2022
Mailing Address 333 108TH AVENUE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90697</b>
City BELLEVUE	State WA	Zip Code 98004
Purpose of Disbursement TRAVEL: AIR		Amount of Each Disbursement this Period [ ] 628.14
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. EXPEDIA INC</b>		Date of Disbursement MM / DD / YYYY 08 / 22 / 2022
Mailing Address 333 108TH AVENUE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90697</b>
City BELLEVUE	State WA	Zip Code 98004
Purpose of Disbursement TRAVEL: AIR		Amount of Each Disbursement this Period [ ] 616.68
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		<input checked="" type="checkbox"/> Memo Item

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. FEDEX**

Full Name (Last, First, Middle Initial)

Mailing Address 942 SOUTH SHADY GROVE ROAD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement DELIVERY SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 18 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period: 32.93

Memo Item

**B. FEDEX**

Full Name (Last, First, Middle Initial)

Mailing Address 942 SOUTH SHADY GROVE ROAD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement DELIVERY SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 17 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period: 83.35

Memo Item

**C. FEDEX**

Full Name (Last, First, Middle Initial)

Mailing Address 942 SOUTH SHADY GROVE ROAD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement DELIVERY SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 13 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period: 139.94

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)

**A. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE ROAD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement DELIVERY SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 04 / 2022

FEC Identification Number

C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period

37.42

Memo Item

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 942 SOUTH SHADY GROVE ROAD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement DELIVERY SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2022

FEC Identification Number

C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period

25.65

Memo Item

Full Name (Last, First, Middle Initial)

**C. GRABIEN INC**

Mailing Address PO BOX 7502

City ALEXANDRIA State VA Zip Code 22307

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 22 / 2022

FEC Identification Number

C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period

1000

Memo Item

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

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

0.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)

## A. HIGHWAY TOLL ADMINISTRATION

Mailing Address 66 POWERHOUSE RD  
#301

City ROSLYN HEIGHTS State NY Zip Code 11577

Purpose of Disbursement  
TRAVEL: TOLLS

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 22 / 2022

FEC Identification Number

C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period

89.38

Memo Item

Full Name (Last, First, Middle Initial)

## B. HIGHWAY TOLL ADMINISTRATION

Mailing Address 66 POWERHOUSE RD  
#301

City ROSLYN HEIGHTS State NY Zip Code 11577

Purpose of Disbursement  
TRAVEL: TOLLS

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 20 / 2022

FEC Identification Number

C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period

25.85

Memo Item

Full Name (Last, First, Middle Initial)

## C. JETBLUE AIRLINES

Mailing Address 27-01 QUEENS PLZ N

City LONG ISLAND CITY State NY Zip Code 11101

Purpose of Disbursement  
TRAVEL: AIR

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 22 / 2022

FEC Identification Number

C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period

272.7

Memo Item

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

0.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

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

Date of Disbursement

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

Mailing Address 10400 FERNWOOD RD

FEC Identification Number

C

**Transaction ID : SB21B.90697**  
Amount of Each Disbursement this Period

2256.98

Memo Item

City BETHESDA State MD Zip Code 20817

Purpose of Disbursement  
TRAVEL: LODGING

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)  
**B. MARRIOTT INTERNATIONAL**

Date of Disbursement

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

Mailing Address 10400 FERNWOOD RD

FEC Identification Number

C

**Transaction ID : SB21B.90697**  
Amount of Each Disbursement this Period

227.08

Memo Item

City BETHESDA State MD Zip Code 20817

Purpose of Disbursement  
TRAVEL: LODGING

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	2	2

Mailing Address 10400 FERNWOOD RD

FEC Identification Number

C

**Transaction ID : SB21B.90697**  
Amount of Each Disbursement this Period

666.37

Memo Item

City BETHESDA State MD Zip Code 20817

Purpose of Disbursement  
TRAVEL: LODGING

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. MARRIOTT INTERNATIONAL</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2022	
Mailing Address 10400 FERNWOOD RD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90697</b> Amount of Each Disbursement this Period [ ] 1083.2	
City BETHESDA	State MD	Zip Code 20817	Category/ Type [ ]
Purpose of Disbursement TRAVEL: LODGING		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) ▼		<input checked="" type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>B. MARRIOTT INTERNATIONAL</b>		Date of Disbursement MM / DD / YYYY 08 / 09 / 2022	
Mailing Address 10400 FERNWOOD RD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90697</b> Amount of Each Disbursement this Period [ ] 1846.62	
City BETHESDA	State MD	Zip Code 20817	Category/ Type [ ]
Purpose of Disbursement TRAVEL: LODGING		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) ▼		<input checked="" type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>C. MARRIOTT INTERNATIONAL</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2022	
Mailing Address 10400 FERNWOOD RD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90697</b> Amount of Each Disbursement this Period [ ] 17.93	
City BETHESDA	State MD	Zip Code 20817	Category/ Type [ ]
Purpose of Disbursement TRAVEL: LODGING		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) ▼		<input checked="" type="checkbox"/> Memo Item
State: District:			

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. MARRIOTT INTERNATIONAL**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 10400 FERNWOOD RD

M M M	/	D D D	/	Y Y Y Y Y
08		06		2022

City BETHESDA State MD Zip Code 20817

FEC Identification Number

Purpose of Disbursement  
TRAVEL: LODGING

C

Candidate Name

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

1142.7

State: District:

Memo Item

**B. MARRIOTT INTERNATIONAL**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 10400 FERNWOOD RD

M M M	/	D D D	/	Y Y Y Y Y
08		06		2022

City BETHESDA State MD Zip Code 20817

FEC Identification Number

Purpose of Disbursement  
TRAVEL: LODGING

C

Candidate Name

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

1094.66

State: District:

Memo Item

**C. MARRIOTT INTERNATIONAL**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 10400 FERNWOOD RD

M M M	/	D D D	/	Y Y Y Y Y
08		02		2022

City BETHESDA State MD Zip Code 20817

FEC Identification Number

Purpose of Disbursement  
TRAVEL: LODGING

C

Candidate Name

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

1085.51

State: District:

Memo Item

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. MARRIOTT INTERNATIONAL</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2022
Mailing Address 10400 FERNWOOD RD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90697</b> Amount of Each Disbursement this Period [ ] 1244.83
City BETHESDA	State MD	Zip Code 20817
Purpose of Disbursement TRAVEL: LODGING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: [ ] District: [ ]	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. MARRIOTT INTERNATIONAL</b>		Date of Disbursement MM / DD / YYYY 08 / 22 / 2022
Mailing Address 10400 FERNWOOD RD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90697</b> Amount of Each Disbursement this Period [ ] 1299.84
City BETHESDA	State MD	Zip Code 20817
Purpose of Disbursement TRAVEL: LODGING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: [ ] District: [ ]	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. MARRIOTT INTERNATIONAL</b>		Date of Disbursement MM / DD / YYYY 08 / 19 / 2022
Mailing Address 10400 FERNWOOD RD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90697</b> Amount of Each Disbursement this Period [ ] 1436.26
City BETHESDA	State MD	Zip Code 20817
Purpose of Disbursement TRAVEL: LODGING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: [ ] District: [ ]	<input checked="" type="checkbox"/> Memo Item	

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. STERICYCLE INC</b>		Date of Disbursement MM / DD / YYYY 08 / 21 / 2022
Mailing Address 28161 N KEITH DR		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90697</b>
City LAKE FOREST	State IL	Zip Code 60045
Purpose of Disbursement OFFICE EQUIPMENT	Category/Type [ ]	
Candidate Name	Amount of Each Disbursement this Period [ ] 5.35	
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SOUTHWEST AIRLINES</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2022
Mailing Address 2702 LOVE FIELD DRIVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90697</b>
City DALLAS	State TX	Zip Code 75235
Purpose of Disbursement TRAVEL: AIR	Category/Type [ ]	
Candidate Name	Amount of Each Disbursement this Period [ ] 191.98	
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. STAPLES</b>		Date of Disbursement MM / DD / YYYY 07 / 28 / 2022
Mailing Address 500 STAPLES DRIVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90697</b>
City FRAMINGHAM	State MA	Zip Code 01702
Purpose of Disbursement OFFICE SUPPLIES	Category/Type [ ]	
Candidate Name	Amount of Each Disbursement this Period [ ] 225.59	
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

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

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

[ ]	0.00
[ ]	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

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

Date of Disbursement  
MM / DD / YYYY  
07 / 28 / 2022

Mailing Address 500 STAPLES DRIVE

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

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

State: District:

FEC Identification Number  
C  
Transaction ID : SB21B.90697  
Amount of Each Disbursement this Period  
267.51

Memo Item

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

Date of Disbursement  
MM / DD / YYYY  
08 / 08 / 2022

Mailing Address 500 STAPLES DRIVE

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement CREDIT: OFFICE SUPPLIES

Candidate Name

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

State: District:

FEC Identification Number  
C  
Transaction ID : SB21B.90697  
Amount of Each Disbursement this Period  
- 267.51

Memo Item

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

Date of Disbursement  
MM / DD / YYYY  
08 / 01 / 2022

Mailing Address 500 STAPLES DRIVE

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

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

State: District:

FEC Identification Number  
C  
Transaction ID : SB21B.90697  
Amount of Each Disbursement this Period  
186.48

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

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

Mailing Address 500 STAPLES DRIVE

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 22 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period: 46.9

Memo Item

Full Name (Last, First, Middle Initial)  
**B. TATANGO INC**

Mailing Address 600 STEWARD ST SUITE 400

City SEATTLE State WA Zip Code 98101

Purpose of Disbursement SMS ADVERTISING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 01 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period: 1500

Memo Item

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

Mailing Address 600 STEWARD ST SUITE 400

City SEATTLE State WA Zip Code 98101

Purpose of Disbursement SMS ADVERTISING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 22 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period: 480.27

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)  
**A. THE EPOCH TIMES ASSOCIATION INC.**

Date of Disbursement: MM / DD / YYYY  
08 / 17 / 2022

Mailing Address: 229 W 28TH ST

City: NEW YORK State: NY Zip Code: 10001

Purpose of Disbursement: SUBSCRIPTIONS

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C \_\_\_\_\_  
Transaction ID : **SB21B.90697**  
Amount of Each Disbursement this Period: 9.99

Memo Item

Full Name (Last, First, Middle Initial)  
**B. THE FINANCIAL TIMES LIMITED**

Date of Disbursement: MM / DD / YYYY  
08 / 17 / 2022

Mailing Address: 330 HUDSON ST  
8TH FL

City: NEW YORK State: NY Zip Code: 10013

Purpose of Disbursement: SUBSCRIPTIONS

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C \_\_\_\_\_  
Transaction ID : **SB21B.90697**  
Amount of Each Disbursement this Period: 40

Memo Item

Full Name (Last, First, Middle Initial)  
**C. TRUMP HOTEL COLLECTION**

Date of Disbursement: MM / DD / YYYY  
07 / 28 / 2022

Mailing Address: 725 FIFTH AVENUE

City: NEW YORK State: NY Zip Code: 10022

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C \_\_\_\_\_  
Transaction ID : **SB21B.90697**  
Amount of Each Disbursement this Period: 6995.62

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. UNITED AIRLINES</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2022
Mailing Address 233 S WACKER DRIVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90697</b> Amount of Each Disbursement this Period [ ] 283.38
City CHICAGO	State IL	Zip Code 60606
Purpose of Disbursement TRAVEL: AIR		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. UNITED AIRLINES</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2022
Mailing Address 233 S WACKER DRIVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90697</b> Amount of Each Disbursement this Period [ ] 224.19
City CHICAGO	State IL	Zip Code 60606
Purpose of Disbursement TRAVEL: AIR		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. UNITED AIRLINES</b>		Date of Disbursement MM / DD / YYYY 08 / 04 / 2022
Mailing Address 233 S WACKER DRIVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90697</b> Amount of Each Disbursement this Period [ ] 230.09
City CHICAGO	State IL	Zip Code 60606
Purpose of Disbursement TRAVEL: AIR		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)

## A. USPS

Mailing Address 475 LENFANT PLZ SW

City  
WASHINGTON

State  
DC

Zip Code  
20260

Purpose of Disbursement  
POSTAGE

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:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period

1	2	7	2	.	1
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

## B. WALL ST JOURNAL

Mailing Address 1211 AVENUE OF THE AMERICAS

City  
NEW YORK

State  
NY

Zip Code  
10036

Purpose of Disbursement  
SUBSCRIPTIONS

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:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period

3	8	.	9	9
---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

## C. WALMART

Mailing Address 702 SW 8TH ST

City  
BENTONVILLE

State  
AR

Zip Code  
72716

Purpose of Disbursement  
OFFICE SUPPLIES

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:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.90697

Amount of Each Disbursement this Period

9	2	6	.	6	2
---	---	---	---	---	---

Memo Item

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

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

0	0	0	0
---	---	---	---

0	0	0	0
---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)  
**A. APPLIED TRUSS AND ELECTRONICS**

Mailing Address **722 BLUE CRAB ROAD**

City **NEWPORT NEWS** State **VA** Zip Code **23606**

Purpose of Disbursement  
**EVENT STAGING EQUIPMENT**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: **08 / 31 / 2022**

FEC Identification Number: **C**  
**Transaction ID : SB21B.90588**  
Amount of Each Disbursement this Period: **14987.28**

Memo Item

Full Name (Last, First, Middle Initial)  
**B. BCVM SERVICES LLC**

Mailing Address **1512 E BROWARD BLVD  
UNIT 104B**

City **FORT LAUDERDALE** State **FL** Zip Code **33301**

Purpose of Disbursement  
**RADIO ADVERTISING**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: **08 / 04 / 2022**

FEC Identification Number: **C**  
**Transaction ID : SB21B.90057**  
Amount of Each Disbursement this Period: **10000**

Memo Item

Full Name (Last, First, Middle Initial)  
**C. BCVM SERVICES LLC**

Mailing Address **1512 E BROWARD BLVD  
UNIT 104B**

City **FORT LAUDERDALE** State **FL** Zip Code **33301**

Purpose of Disbursement  
**RADIO ADVERTISING**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: **08 / 31 / 2022**

FEC Identification Number: **C**  
**Transaction ID : SB21B.90595**  
Amount of Each Disbursement this Period: **10000**

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ **34987.28**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. BELMONT STRATEGIES LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2022
Mailing Address 184 WEST BOYLSTON ST.		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90114</b> Amount of Each Disbursement this Period [ ] 10000
City WEST BOYLSTON	State MA	Zip Code 01583
Purpose of Disbursement COMMUNICATIONS CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. C&amp;M TRANSCONTINENTAL, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 25 / 2022
Mailing Address 186 TALMAGE RD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90248</b> Amount of Each Disbursement this Period [ ] 17521.02
City MENDHAM	State NJ	Zip Code 07945
Purpose of Disbursement ADVANCE CONSULTING & TRAVEL EXPENSES		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. CLAYTON HENSON CONSULTING, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 11 / 2022
Mailing Address 7341 PATCH COURT		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90251</b> Amount of Each Disbursement this Period [ ] 13346.14
City CANAL WINCHESTER	State OH	Zip Code 43110
Purpose of Disbursement STRATEGY CONSULTING & TRAVEL EXPENSES		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 40867.16
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)

**A. COMPASS LEGAL SERVICES, INC.**

Mailing Address 300 INDEPENDENCE AVENUE, SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
LEGAL CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.90146**  
Amount of Each Disbursement this Period  
[ ] 15000

Memo Item

Full Name (Last, First, Middle Initial)

**B. CRITTON, LUTTIER & COLEMAN, LLP LAW OFFICES TRUST ACCOUNT**

Mailing Address 303 BANYAN BLVD  
#400

City  
WEST PALM BEACH

State  
FL

Zip Code  
33401

Purpose of Disbursement  
LEGAL CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.90646**  
Amount of Each Disbursement this Period  
[ ] 3000000

Memo Item

Full Name (Last, First, Middle Initial)

**C. DEX IMAGING**

Mailing Address PO BOX 17299

City  
CLEARWATER

State  
FL

Zip Code  
33762

Purpose of Disbursement  
OFFICE EQUIPMENT

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
0	8		0	4		2	0	2	2

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.90156**  
Amount of Each Disbursement this Period  
[ ] 152.19

Memo Item

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

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

3	0	1	5	1	2	.	1	9
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. DHILLON LAW GROUP INC.</b>		Date of Disbursement MM / DD / YYYY 08 / 11 / 2022
Mailing Address 177 POST STREET, SUITE 700		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90356</b> Amount of Each Disbursement this Period 40546.97
City SAN FRANCISCO	State CA	Zip Code 94108
Purpose of Disbursement LEGAL CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. DHILLON LAW GROUP INC.</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2022
Mailing Address 177 POST STREET, SUITE 700		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90589</b> Amount of Each Disbursement this Period 40546.97
City SAN FRANCISCO	State CA	Zip Code 94108
Purpose of Disbursement LEGAL CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. ELECTIONS, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 02 / 2022
Mailing Address 1050 CONNECTICUT AVE NW SUITE 500		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90151</b> Amount of Each Disbursement this Period 10000
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement LEGAL CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

91093.94

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

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

Date of Disbursement: MM / DD / YYYY  
08 / 04 / 2022

Mailing Address: 1050 CONNECTICUT AVE NW  
SUITE 500

City: WASHINGTON State: DC Zip Code: 20036

Purpose of Disbursement: REGISTRATION FEE

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C  
Transaction ID : SB21B.90155  
Amount of Each Disbursement this Period: 452

Memo Item

Full Name (Last, First, Middle Initial)  
**B. EVENT STRATEGIES, INC.**

Date of Disbursement: MM / DD / YYYY  
08 / 04 / 2022

Mailing Address: 510 KING STREET  
SUITE 410

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: AUDIO VISUAL SERVICES, EVENT STAGING EXPENSE & TRAVEL EXPENSES

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C  
Transaction ID : SB21B.90072  
Amount of Each Disbursement this Period: 449914.84

Memo Item

Full Name (Last, First, Middle Initial)  
**C. EVENT STRATEGIES, INC.**

Date of Disbursement: MM / DD / YYYY  
08 / 11 / 2022

Mailing Address: 510 KING STREET  
SUITE 410

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: AUDIO VISUAL SERVICES, EVENT STAGING EXPENSE & TRAVEL EXPENSES

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C  
Transaction ID : SB21B.90251  
Amount of Each Disbursement this Period: 7500

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 457866.84

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)

**A. EVENT STRATEGIES, INC.**

Date of Disbursement

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

Mailing Address 510 KING STREET  
SUITE 410

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
AUDIO VISUAL SERVICES, EVENT STAGING EXPENSE & TRAVEL EXPENSES  
Candidate Name

Category/Type
---------------

FEC Identification Number

C
Transaction ID : SB21B.90327
Amount of Each Disbursement this Period
284022.68

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

Memo Item

Full Name (Last, First, Middle Initial)

**B. EVENT STRATEGIES, INC.**

Date of Disbursement

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

Mailing Address 510 KING STREET  
SUITE 410

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
AUDIO VISUAL SERVICES, EVENT STAGING EXPENSE & TRAVEL EXPENSES  
Candidate Name

Category/Type
---------------

FEC Identification Number

C
Transaction ID : SB21B.90660
Amount of Each Disbursement this Period
43584.36

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

Memo Item

Full Name (Last, First, Middle Initial)

**C. EVENT STRATEGIES, INC.**

Date of Disbursement

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

Mailing Address 510 KING STREET  
SUITE 410

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
AUDIO VISUAL SERVICES, EVENT STAGING EXPENSE & TRAVEL EXPENSES  
Candidate Name

Category/Type
---------------

FEC Identification Number

C
Transaction ID : SB21B.90661
Amount of Each Disbursement this Period
3787.67

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

Memo Item

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

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

331394.71
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. FINDLING LAW FIRM</b>		Date of Disbursement MM / DD / YYYY 08 / 25 / 2022
Mailing Address ONE SECURITIES CENTER 3490 PIEDMONT ROAD SUITE 600		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90542</b> Amount of Each Disbursement this Period 91209.71
City ATLANTA	State GA	Zip Code 30305
Purpose of Disbursement LEGAL CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. GABRIEL STRATEGIES LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 25 / 2022
Mailing Address 14 BINGHAM HILL CIR		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90561'</b> Amount of Each Disbursement this Period 15977.66
City RUMSON	State NJ	Zip Code 07760
Purpose of Disbursement STRATEGY CONSULTING & TRAVEL EXPENSES		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. GEORGETOWN ADVISORY</b>		Date of Disbursement MM / DD / YYYY 08 / 11 / 2022
Mailing Address 414 SAYRE DR.		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90337</b> Amount of Each Disbursement this Period 15000
City PRINCETON	State NJ	Zip Code 08540
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

122187.37

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

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

Mailing Address 414 SAYRE DR.

City PRINCETON State NJ Zip Code 08540

Purpose of Disbursement STRATEGY CONSULTING

Candidate Name

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

State: District:

Date of Disbursement: 08 / 31 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90610

Amount of Each Disbursement this Period: 30000

Memo Item

Full Name (Last, First, Middle Initial)  
**B. GREATAMERICA FINANCIAL SERVICES**

Mailing Address PO BOX 660831

City DALLAS State TX Zip Code 75266

Purpose of Disbursement OFFICE EQUIPMENT

Candidate Name

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

State: District:

Date of Disbursement: 08 / 11 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90258

Amount of Each Disbursement this Period: 573.81

Memo Item

Full Name (Last, First, Middle Initial)  
**C. HABBA MADAI & ASSOCIATES LLP**

Mailing Address 1430 U.S. HIGHWAY 206, SUITE 240

City BEDMINSTER State NJ Zip Code 07921

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

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

State: District:

Date of Disbursement: 08 / 16 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90301

Amount of Each Disbursement this Period: 207827.13

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 238400.94

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. HERVE PIERRE BRAILLARD**

Full Name (Last, First, Middle Initial)

Mailing Address 225 5TH AVENUE #9K

City NEW YORK State NY Zip Code 10010

Purpose of Disbursement STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 02 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90155

Amount of Each Disbursement this Period: 18000

Memo Item

**B. HIGH GROUND STRATEGIES LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1501 42ND STREET, SUITE 500

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement POLITICAL STRATEGY CONSULTING & TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 04 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90113

Amount of Each Disbursement this Period: 9060.68

Memo Item

**C. HUDSON DIGITAL LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 9 WOODS BROOKE LANE APARTMENT #1

City YORKTOWN HEIGHTS State NY Zip Code 10598

Purpose of Disbursement DIGITAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 09 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90247

Amount of Each Disbursement this Period: 20000

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 47060.68

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. IFRAH LAW PLLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1717 PENNSYLVANIA AVE, N.W.  
SUITE 650

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement MM / DD / YYYY 08 / 22 / 2022

FEC Identification Number C

Transaction ID : SB21B.90511

Amount of Each Disbursement this Period 100000

Memo Item

**B. JPROWLEY LAW PLLC**

Full Name (Last, First, Middle Initial)

Mailing Address 8639 CHASE GLEN CIR.

City FAIRFAX STATION State VA Zip Code 22039

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement MM / DD / YYYY 08 / 15 / 2022

FEC Identification Number C

Transaction ID : SB21B.90399

Amount of Each Disbursement this Period 27266

Memo Item

**C. JPROWLEY LAW PLLC**

Full Name (Last, First, Middle Initial)

Mailing Address 8639 CHASE GLEN CIR.

City FAIRFAX STATION State VA Zip Code 22039

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement MM / DD / YYYY 08 / 17 / 2022

FEC Identification Number C

Transaction ID : SB21B.90444

Amount of Each Disbursement this Period 25000

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 152266.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. KACONSULTING LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 24 / 2022	
Mailing Address 2943 BENTON PLACE NW			
City WASHINGTON	State DC	Zip Code 20008	
Purpose of Disbursement POLLING EXPENSE		Category/Type <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
		FEC Identification Number C <b>Transaction ID : SB21B.90563</b> Amount of Each Disbursement this Period 124095.06	
		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. MAGNOLIA MANAGEMENT LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 02 / 2022	
Mailing Address 4160 NW 58TH STREET			
City COCONUT CREEK	State FL	Zip Code 33073	
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/Type <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
		FEC Identification Number C <b>Transaction ID : SB21B.90145</b> Amount of Each Disbursement this Period 9166.66	
		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. MATCHPOINT STRATEGIES, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2022	
Mailing Address 1 SW 51ST STREET			
City DES MOINES	State IA	Zip Code 50312	
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/Type <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
		FEC Identification Number C <b>Transaction ID : SB21B.90641</b> Amount of Each Disbursement this Period 5000	
		<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶	138261.72
<b>TOTAL</b> This Period (last page this line number only)..... ▶	



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. MOHEGAN SUN ARENA AT CASEY PLAZA**

Full Name (Last, First, Middle Initial)

Mailing Address 255 HIGHLAND PARK BLVD.

City WILKES-BARRE State PA Zip Code 18702

Purpose of Disbursement FACILITY RENTAL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 25 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90498

Amount of Each Disbursement this Period: 40000

Memo Item

**B. NEAL & HARWELL, PLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1201 DEMONBREUN STREET SUITE 1000

City NASHVILLE State TN Zip Code 37203

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 25 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90443

Amount of Each Disbursement this Period: 5653

Memo Item

**C. NEW AGE CONSULTING LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1712 PIONEER AVE. SUITE 500

City CHEYENNE State WY Zip Code 82001

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 01 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90111

Amount of Each Disbursement this Period: 8333.33

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 53986.33

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. OCEAN POINT ADVISORS LLC</b>			Date of Disbursement MM / DD / YYYY 08 / 31 / 2022	
Mailing Address 530-B HARKLE ROAD STE 100				
City SANTA FE		State NM	Zip Code 87505	
Purpose of Disbursement COMMUNICATIONS CONSULTING			<input type="checkbox"/> 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		

FEC Identification Number  
**C** [REDACTED]  
**Transaction ID : SB21B.90612**  
Amount of Each Disbursement this Period  
[REDACTED] 10000

Full Name (Last, First, Middle Initial) <b>B. PARLATORE LAW GROUP, LLP</b>			Date of Disbursement MM / DD / YYYY 08 / 01 / 2022	
Mailing Address ONE WORLD TRADE CENTER, SUITE 8500				
City NEW YORK		State NY	Zip Code 10007	
Purpose of Disbursement LEGAL CONSULTING			<input type="checkbox"/> 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		

FEC Identification Number  
**C** [REDACTED]  
**Transaction ID : SB21B.90080**  
Amount of Each Disbursement this Period  
[REDACTED] 29870.54

Full Name (Last, First, Middle Initial) <b>C. PARSCALE STRATEGY, LLC</b>			Date of Disbursement MM / DD / YYYY 08 / 04 / 2022	
Mailing Address 1512 E BROWARD STE #104B				
City FORT LAUDERDALE		State FL	Zip Code 33301	
Purpose of Disbursement DIGITAL CONSULTING			<input type="checkbox"/> 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		

FEC Identification Number  
**C** [REDACTED]  
**Transaction ID : SB21B.90111**  
Amount of Each Disbursement this Period  
[REDACTED] 10000

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 49870.54
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. BALL, LUKE, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2022
Mailing Address PO BOX 13570		FEC Identification Number <b>C</b>
City ARLINGTON	State VA	
Purpose of Disbursement PAYROLL		Transaction ID : <b>SB21B.90357</b>
Candidate Name		Amount of Each Disbursement this Period 3313.06
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BOBB, CHRISTINA, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2022
Mailing Address PO BOX 13570		FEC Identification Number <b>C</b>
City ARLINGTON	State VA	
Purpose of Disbursement PAYROLL		Transaction ID : <b>SB21B.90357</b>
Candidate Name		Amount of Each Disbursement this Period 6025.53
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BUDOWICH, TAYLOR, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2022
Mailing Address PO BOX 13570		FEC Identification Number <b>C</b>
City ARLINGTON	State VA	
Purpose of Disbursement PAYROLL		Transaction ID : <b>SB21B.90357</b>
Candidate Name		Amount of Each Disbursement this Period 4820.72
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

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

14159.31

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. CENTINELLO, DARREN, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 12 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90357

Amount of Each Disbursement this Period: 5057.17

Memo Item

**B. D'ANTUONO, HAYLEY, L, ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 12 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90357

Amount of Each Disbursement this Period: 4066.65

Memo Item

**C. FAUPEL, MADISON, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 12 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90357

Amount of Each Disbursement this Period: 3717.85

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 12841.67

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. FINZER, MARY, C, ,</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2022	
Mailing Address PO BOX 13570		FEC Identification Number C [REDACTED]	
City ARLINGTON	State VA	Zip Code 22219	Transaction ID : <b>SB21B.90357</b>
Purpose of Disbursement PAYROLL		Category/Type [REDACTED]	Amount of Each Disbursement this Period 2751.95
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. HALLIGAN, LINDSEY, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2022	
Mailing Address PO BOX 13570		FEC Identification Number C [REDACTED]	
City ARLINGTON	State VA	Zip Code 22219	Transaction ID : <b>SB21B.90357</b>
Purpose of Disbursement PAYROLL		Category/Type [REDACTED]	Amount of Each Disbursement this Period 7256.44
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. HARP, NATALIE, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2022	
Mailing Address PO BOX 13570		FEC Identification Number C [REDACTED]	
City ARLINGTON	State VA	Zip Code 22219	Transaction ID : <b>SB21B.90357</b>
Purpose of Disbursement PAYROLL		Category/Type [REDACTED]	Amount of Each Disbursement this Period 4658.23
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	14666.62
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. HARRIS, CHAMBERLAIN, R, ,</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2022
Mailing Address PO BOX 13570		FEC Identification Number C <b>Transaction ID : SB21B.90357</b> Amount of Each Disbursement this Period 3232.59
City ARLINGTON	State VA	
Zip Code 22219	Purpose of Disbursement PAYROLL	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. HARRISON, WILLIAM, B, ,</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2022
Mailing Address PO BOX 13570		FEC Identification Number C <b>Transaction ID : SB21B.90357</b> Amount of Each Disbursement this Period 4557.7
City ARLINGTON	State VA	
Zip Code 22219	Purpose of Disbursement PAYROLL	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MARTIN, MARGO, M, ,</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2022
Mailing Address PO BOX 13570		FEC Identification Number C <b>Transaction ID : SB21B.90357</b> Amount of Each Disbursement this Period 4800.62
City ARLINGTON	State VA	
Zip Code 22219	Purpose of Disbursement PAYROLL	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	12590.91
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. MICHAEL, MOLLY, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 12 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90357

Amount of Each Disbursement this Period: 6025.52

Memo Item

**B. MILLER, JOANNA, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 12 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90357

Amount of Each Disbursement this Period: 4088.65

Memo Item

**C. MILLER, STEPHEN, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 12 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90357

Amount of Each Disbursement this Period: 4193.64

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 14307.81

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





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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. SCAVINO, DANIEL, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 12 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90357

Amount of Each Disbursement this Period: 4915.13

Memo Item

**B. SHEW, ELIZABETH, K, ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 12 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90357

Amount of Each Disbursement this Period: 3843.63

Memo Item

**C. THOMPSON, DESIREE, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 12 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90357

Amount of Each Disbursement this Period: 4943.01

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 13701.77

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)  
**A. THURSTON, ELIZA, C, ,**

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
08 / 12 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.90357  
Amount of Each Disbursement this Period  
3986.65

Memo Item

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

Mailing Address 1450 CENTREPARK BLVD  
SUITE 150

City WEST PALM BEACH State FL Zip Code 33401

Purpose of Disbursement  
PAYROLL TAXES AND WITHHOLDINGS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
08 / 12 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.90357  
Amount of Each Disbursement this Period  
51916.98

Memo Item

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

Mailing Address 1450 CENTREPARK BLVD  
SUITE 150

City WEST PALM BEACH State FL Zip Code 33401

Purpose of Disbursement  
PAYROLL FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
08 / 15 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.90357  
Amount of Each Disbursement this Period  
154.4

Memo Item

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

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

56058.03

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. BALL, LUKE, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2022
Mailing Address PO BOX 13570		FEC Identification Number C <b>Transaction ID : SB21B.90656</b> Amount of Each Disbursement this Period 3313.05
City ARLINGTON	State VA	
Zip Code 22219	Purpose of Disbursement PAYROLL	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BOBB, CHRISTINA, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2022
Mailing Address PO BOX 13570		FEC Identification Number C <b>Transaction ID : SB21B.90656</b> Amount of Each Disbursement this Period 6025.51
City ARLINGTON	State VA	
Zip Code 22219	Purpose of Disbursement PAYROLL	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BUDOWICH, TAYLOR, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2022
Mailing Address PO BOX 13570		FEC Identification Number C <b>Transaction ID : SB21B.90656</b> Amount of Each Disbursement this Period 4820.72
City ARLINGTON	State VA	
Zip Code 22219	Purpose of Disbursement PAYROLL	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	14159.28
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. CENTINELLO, DARREN, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2022	
Mailing Address PO BOX 13570		FEC Identification Number C [REDACTED]	
City ARLINGTON	State VA	Zip Code 22219	Transaction ID : <b>SB21B.90656</b>
Purpose of Disbursement PAYROLL		Category/ Type	Amount of Each Disbursement this Period 5057.17
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. D'ANTUONO, HAYLEY, L, ,</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2022	
Mailing Address PO BOX 13570		FEC Identification Number C [REDACTED]	
City ARLINGTON	State VA	Zip Code 22219	Transaction ID : <b>SB21B.90656</b>
Purpose of Disbursement PAYROLL		Category/ Type	Amount of Each Disbursement this Period 4066.64
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. DRISCOLL, MACKENZIE, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2022	
Mailing Address PO BOX 13570		FEC Identification Number C [REDACTED]	
City ARLINGTON	State VA	Zip Code 22219	Transaction ID : <b>SB21B.90656</b>
Purpose of Disbursement PAYROLL		Category/ Type	Amount of Each Disbursement this Period 601.59
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9725.40
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. FAUPEL, MADISON, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2022	
Mailing Address PO BOX 13570		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90656</b> Amount of Each Disbursement this Period [REDACTED] 3717.85	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type [REDACTED]
Purpose of Disbursement PAYROLL		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. FINZER, MARY, C, ,</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2022	
Mailing Address PO BOX 13570		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90656</b> Amount of Each Disbursement this Period [REDACTED] 2751.96	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type [REDACTED]
Purpose of Disbursement PAYROLL		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. HALLIGAN, LINDSEY, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2022	
Mailing Address PO BOX 13570		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90656</b> Amount of Each Disbursement this Period [REDACTED] 7256.44	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type [REDACTED]
Purpose of Disbursement PAYROLL		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 13726.25
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. HARP, NATALIE, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 30 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90656

Amount of Each Disbursement this Period: 4658.22

Memo Item

**B. HARRIS, CHAMBERLAIN, R, ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 30 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90656

Amount of Each Disbursement this Period: 3232.57

Memo Item

**C. HARRISON, WILLIAM, B, ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 30 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90656

Amount of Each Disbursement this Period: 4557.7

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 12448.49

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. LEICHTER, GRANT, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 30 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90656

Amount of Each Disbursement this Period: 601.59

Memo Item

**B. MARTIN, MARGO, M, ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 30 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90656

Amount of Each Disbursement this Period: 4800.62

Memo Item

**C. MICHAEL, MOLLY, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 30 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90656

Amount of Each Disbursement this Period: 6025.53

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 11427.74

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. MILLER, STEPHEN, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2022
Mailing Address PO BOX 13570		FEC Identification Number <b>C</b> <b>Transaction ID : SB21B.90656</b> Amount of Each Disbursement this Period 4193.65
City ARLINGTON	State VA	
Zip Code 22219	Purpose of Disbursement PAYROLL	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NAUTA, WALTINE, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2022
Mailing Address PO BOX 13570		FEC Identification Number <b>C</b> <b>Transaction ID : SB21B.90656</b> Amount of Each Disbursement this Period 5227.81
City ARLINGTON	State VA	
Zip Code 22219	Purpose of Disbursement PAYROLL	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PATTON, LYNNE, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2022
Mailing Address PO BOX 13570		FEC Identification Number <b>C</b> <b>Transaction ID : SB21B.90656</b> Amount of Each Disbursement this Period 4658.52
City ARLINGTON	State VA	
Zip Code 22219	Purpose of Disbursement PAYROLL	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

14079.98

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. PORTER, MADISON, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2022
Mailing Address PO BOX 13570		FEC Identification Number <b>C</b>
City ARLINGTON	State VA	
Purpose of Disbursement PAYROLL		Transaction ID : <b>SB21B.90656</b>
Candidate Name		Amount of Each Disbursement this Period 2756.31
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SCAVINO, DANIEL, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2022
Mailing Address PO BOX 13570		FEC Identification Number <b>C</b>
City ARLINGTON	State VA	
Purpose of Disbursement PAYROLL		Transaction ID : <b>SB21B.90656</b>
Candidate Name		Amount of Each Disbursement this Period 4915.12
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SHEW, ELIZABETH, K, ,</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2022
Mailing Address PO BOX 13570		FEC Identification Number <b>C</b>
City ARLINGTON	State VA	
Purpose of Disbursement PAYROLL		Transaction ID : <b>SB21B.90656</b>
Candidate Name		Amount of Each Disbursement this Period 3843.63
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	11515.06
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. THOMPSON, DESIREE, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2022	
Mailing Address PO BOX 13570		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90656</b> Amount of Each Disbursement this Period [ ] 4943.02	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type [ ]
Purpose of Disbursement PAYROLL		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. THURSTON, ELIZA, C, ,</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2022	
Mailing Address PO BOX 13570		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90656</b> Amount of Each Disbursement this Period [ ] 3986.66	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type [ ]
Purpose of Disbursement PAYROLL		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. VANHOOSIER, SAM, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2022	
Mailing Address PO BOX 13570		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90656</b> Amount of Each Disbursement this Period [ ] 601.59	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type [ ]
Purpose of Disbursement PAYROLL		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 9531.27
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)

**A. PAYCHEX**

Mailing Address 1450 CENTREPARK BLVD  
SUITE 150

City WEST PALM BEACH

State FL

Zip Code 33401

Purpose of Disbursement  
PAYROLL TAXES AND WITHHOLDINGS

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2022

FEC Identification Number

C  
**Transaction ID : SB21B.90656**  
Amount of Each Disbursement this Period  
50583.31

Memo Item

Full Name (Last, First, Middle Initial)

**B. PAYCHEX**

Mailing Address 1450 CENTREPARK BLVD  
SUITE 150

City WEST PALM BEACH

State FL

Zip Code 33401

Purpose of Disbursement  
PAYROLL FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2022

FEC Identification Number

C  
**Transaction ID : SB21B.90656**  
Amount of Each Disbursement this Period  
135.8

Memo Item

Full Name (Last, First, Middle Initial)

**C. PERICLES, LLC**

Mailing Address 1150 4TH ST SW APT 1002

City WASHINGTON

State DC

Zip Code 20024

Purpose of Disbursement  
COMMUNICATIONS/POLITICAL STRATEGY CONSULTING & TRAVEL  
EXPENSES  
Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 11 / 2022

FEC Identification Number

C  
**Transaction ID : SB21B.90217**  
Amount of Each Disbursement this Period  
19163.64

Memo Item

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

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

69882.75

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. RAPID LOOP CONSULTING, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2022
Mailing Address 405 S. DALE MABRY HWY, STE 351		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90116</b> Amount of Each Disbursement this Period [ ] 10000
City TAMPA	State FL	Zip Code 33629
Purpose of Disbursement RESEARCH CONSULTING		Category/ Type [ ]
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. RED CURVE SOLUTIONS</b>		Date of Disbursement MM / DD / YYYY 08 / 04 / 2022
Mailing Address 138 CONANT ST STE 201		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90116</b> Amount of Each Disbursement this Period [ ] 25000
City BEVERLY	State MA	Zip Code 01915
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type [ ]
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. RED CURVE SOLUTIONS</b>		Date of Disbursement MM / DD / YYYY 08 / 25 / 2022
Mailing Address 138 CONANT ST STE 201		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90366</b> Amount of Each Disbursement this Period [ ] 57552.23
City BEVERLY	State MA	Zip Code 01915
Purpose of Disbursement DATA PROCESSING SERVICES		Category/ Type [ ]
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

92552.23

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)  
**A. RELX INC. DBA LEXISNEXIS**

Mailing Address P.O. BOX 9584

City NEW YORK State NY Zip Code 10087

Purpose of Disbursement SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 04 / 2022

FEC Identification Number: C

Transaction ID : **SB21B.90154**

Amount of Each Disbursement this Period: 2561

Memo Item

Full Name (Last, First, Middle Initial)  
**B. RIGHT COAST STRATEGIES**

Mailing Address 631 A1A NORTH

City PONTE VEDRA BEACH State FL Zip Code 32082

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 03 / 2022

FEC Identification Number: C

Transaction ID : **SB21B.90143**

Amount of Each Disbursement this Period: 19562.07

Memo Item

Full Name (Last, First, Middle Initial)  
**C. RIGHT COAST STRATEGIES**

Mailing Address 631 A1A NORTH

City PONTE VEDRA BEACH State FL Zip Code 32082

Purpose of Disbursement TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 04 / 2022

FEC Identification Number: C

Transaction ID : **SB21B.90144**

Amount of Each Disbursement this Period: 1972.46

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 24095.53

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. RIGHT COAST STRATEGIES</b>		Date of Disbursement MM / DD / YYYY 08 / 09 / 2022
Mailing Address 631 A1A NORTH		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90156</b> Amount of Each Disbursement this Period [ ] 11211.5
City PONTE VEDRA BEACH	State FL	Zip Code 32082
Purpose of Disbursement TRAVEL EXPENSES		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. RIGHT SIDE BROADCASTING NETWORK LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 11 / 2022
Mailing Address 1550 OPELIKA RD STE 6 BOX 344		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90247</b> Amount of Each Disbursement this Period [ ] 1000
City AUBURN	State AL	Zip Code 36830
Purpose of Disbursement EVENT EXPENSE: BROADCASTING		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. RIGHT SIDE BROADCASTING NETWORK LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 25 / 2022
Mailing Address 1550 OPELIKA RD STE 6 BOX 344		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90403</b> Amount of Each Disbursement this Period [ ] 1000
City AUBURN	State AL	Zip Code 36830
Purpose of Disbursement EVENT EXPENSE: BROADCASTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 13211.50
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. SILVERMAN THOMPSON SLUTKIN &amp; WHITE, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 31 / 2022
Mailing Address 400 EAST PRATT STREET SUITE 900		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90518</b> Amount of Each Disbursement this Period 18412.5
City BALTIMORE	State MD	Zip Code 21202
Purpose of Disbursement LEGAL CONSULTING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. SILVERMAN THOMPSON SLUTKIN &amp; WHITE, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 11 / 2022
Mailing Address 400 EAST PRATT STREET SUITE 900		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90307</b> Amount of Each Disbursement this Period 50000
City BALTIMORE	State MD	Zip Code 21202
Purpose of Disbursement LEGAL CONSULTING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. TMONE LLC DBA MASS MARKETS</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2022
Mailing Address 2937 SIERRA CT SW		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90006</b> Amount of Each Disbursement this Period 40353.59
City IOWA CITY	State IA	Zip Code 55240
Purpose of Disbursement TELEMARKETING & DATA MANAGEMENT SERVICES		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

108766.09

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)

**A. TMONE LLC DBA MASS MARKETS**

Mailing Address 2937 SIERRA CT SW

City IOWA CITY State IA Zip Code 55240

Purpose of Disbursement  
TELEMARKETING, DATA MANAGEMENT SERVICES, & POLLING EXPENSE  
Candidate Name

Category/Type

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

Date of Disbursement

MM / DD / YYYY  
08 / 25 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.90449  
Amount of Each Disbursement this Period  
124259.11

Memo Item

Full Name (Last, First, Middle Initial)

**B. TRISHUL, LLC**

Mailing Address 919 FLORIDA AVE NW  
SUITE 101

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
STRATEGY CONSULTING  
Candidate Name

Category/Type

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

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.90471  
Amount of Each Disbursement this Period  
7500

Memo Item

Full Name (Last, First, Middle Initial)

**C. TRUMP HOTEL COLLECTION**

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement  
FACILITY RENTAL/CATERING SERVICES  
Candidate Name

Category/Type

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

Date of Disbursement

MM / DD / YYYY  
08 / 25 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.90354  
Amount of Each Disbursement this Period  
2846.23

Memo Item

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

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

134605.34



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. UNITEDHEALTH GROUP**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1459

City MINNEAPOLIS State MN Zip Code 55440

Purpose of Disbursement INSURANCE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 10 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90265

Amount of Each Disbursement this Period: 7332.4

Memo Item

**B. WAUKESHA COUNTY EXPOSITION CENTER**

Full Name (Last, First, Middle Initial)

Mailing Address 1000 NORTHVIEW ROAD

City WAUKESHA State WI Zip Code 53188

Purpose of Disbursement FACILITY RENTAL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 02 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90157

Amount of Each Disbursement this Period: 24000

Memo Item

**C. WEBER, CRABB & WEIN, P.A.**

Full Name (Last, First, Middle Initial)

Mailing Address 5453 CENTRAL AVE

City ST. PETERSBURG State FL Zip Code 33710

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 24 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90473

Amount of Each Disbursement this Period: 50000

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 81332.40

**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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)  
**A. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 01 / 2022

FEC Identification Number  
**C**

Transaction ID : **SB21B.90082**

Amount of Each Disbursement this Period  
6.44

Memo Item

Full Name (Last, First, Middle Initial)  
**B. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 02 / 2022

FEC Identification Number  
**C**

Transaction ID : **SB21B.90105**

Amount of Each Disbursement this Period  
13.48

Memo Item

Full Name (Last, First, Middle Initial)  
**C. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 03 / 2022

FEC Identification Number  
**C**

Transaction ID : **SB21B.90154**

Amount of Each Disbursement this Period  
3.7

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 23.62

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 04 / 2022
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90194</b> Amount of Each Disbursement this Period [ ] 32.07
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		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. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 05 / 2022
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90221!</b> Amount of Each Disbursement this Period [ ] 2.91
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		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. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 08 / 2022
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9024!</b> Amount of Each Disbursement this Period [ ] 12.57
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		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)..... ▶

47.55

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)  
**A. WINRED TECHNICAL SERVICES LLC**

Date of Disbursement: MM / DD / YYYY  
08 / 09 / 2022

Mailing Address: 1776 WILSON BLVD  
SUITE 530

City: ARLINGTON State: VA Zip Code: 22219

Purpose of Disbursement: MERCHANT FEES

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: **C**

Transaction ID : **SB21B.90277**

Amount of Each Disbursement this Period: 5.77

Memo Item

Full Name (Last, First, Middle Initial)  
**B. WINRED TECHNICAL SERVICES LLC**

Date of Disbursement: MM / DD / YYYY  
08 / 10 / 2022

Mailing Address: 1776 WILSON BLVD  
SUITE 530

City: ARLINGTON State: VA Zip Code: 22219

Purpose of Disbursement: MERCHANT FEES

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: **C**

Transaction ID : **SB21B.90297**

Amount of Each Disbursement this Period: 6.09

Memo Item

Full Name (Last, First, Middle Initial)  
**C. WINRED TECHNICAL SERVICES LLC**

Date of Disbursement: MM / DD / YYYY  
08 / 11 / 2022

Mailing Address: 1776 WILSON BLVD  
SUITE 530

City: ARLINGTON State: VA Zip Code: 22219

Purpose of Disbursement: MERCHANT FEES

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: **C**

Transaction ID : **SB21B.90321**

Amount of Each Disbursement this Period: 13.34

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 25.20

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement MM / DD / YYYY 08 / 12 / 2022	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90344</b>	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period [REDACTED] 33.94	
Purpose of Disbursement MERCHANT FEES		Category/Type [REDACTED]	Memo Item <input type="checkbox"/>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:				

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement MM / DD / YYYY 08 / 15 / 2022	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90368</b>	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period [REDACTED] 9.1	
Purpose of Disbursement MERCHANT FEES		Category/Type [REDACTED]	Memo Item <input type="checkbox"/>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:				

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement MM / DD / YYYY 08 / 16 / 2022	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90393</b>	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period [REDACTED] 13.25	
Purpose of Disbursement MERCHANT FEES		Category/Type [REDACTED]	Memo Item <input type="checkbox"/>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 56.29
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2022
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90410</b>
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period [REDACTED] 11.2
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2022
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90438</b>
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period [REDACTED] 28.07
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 19 / 2022
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90462</b>
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period [REDACTED] 14.73
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 54.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement MM / DD / YYYY 08 / 22 / 2022		
Mailing Address 1776 WILSON BLVD SUITE 530					
City ARLINGTON	State VA	Zip Code 22219			
Purpose of Disbursement MERCHANT FEES		<input type="checkbox"/> Category/Type		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90484</b> Amount of Each Disbursement this Period [REDACTED] 5.62	
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:					

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement MM / DD / YYYY 08 / 23 / 2022		
Mailing Address 1776 WILSON BLVD SUITE 530					
City ARLINGTON	State VA	Zip Code 22219			
Purpose of Disbursement MERCHANT FEES		<input type="checkbox"/> Category/Type		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90506</b> Amount of Each Disbursement this Period [REDACTED] 12.45	
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:					

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement MM / DD / YYYY 08 / 24 / 2022		
Mailing Address 1776 WILSON BLVD SUITE 530					
City ARLINGTON	State VA	Zip Code 22219			
Purpose of Disbursement MERCHANT FEES		<input type="checkbox"/> Category/Type		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90536</b> Amount of Each Disbursement this Period [REDACTED] 19.08	
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶	[REDACTED] 37.15
<b>TOTAL</b> This Period (last page this line number only)..... ▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement MM / DD / YYYY 08 / 25 / 2022	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90554</b>	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period [REDACTED] 71.45	
Purpose of Disbursement MERCHANT FEES		Category/ Type [REDACTED]	Memo Item <input type="checkbox"/>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:				

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement MM / DD / YYYY 08 / 26 / 2022	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90578</b>	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period [REDACTED] 9.11	
Purpose of Disbursement MERCHANT FEES		Category/ Type [REDACTED]	Memo Item <input type="checkbox"/>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:				

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement MM / DD / YYYY 08 / 29 / 2022	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90598</b>	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period [REDACTED] 31.83	
Purpose of Disbursement MERCHANT FEES		Category/ Type [REDACTED]	Memo Item <input type="checkbox"/>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:				

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

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

[REDACTED] 112.39
[REDACTED]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2022
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90620</b>
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type [REDACTED]	
Candidate Name	Amount of Each Disbursement this Period [REDACTED] 16.14	
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 31 / 2022
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90643</b>
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type [REDACTED]	
Candidate Name	Amount of Each Disbursement this Period [REDACTED] 16.2	
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. X STRATEGIES LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 04 / 2022
Mailing Address 340 ROYAL POINCIANA WAY STE 317-164		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90167</b>
City PALM BEACH	State FL	Zip Code 33480
Purpose of Disbursement ONLINE ADVERTISING	Category/Type [REDACTED]	
Candidate Name	Amount of Each Disbursement this Period [REDACTED] 15000	
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

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

15032.34

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. ZETA GLOBAL CORP</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2022	
Mailing Address 3 PARK AVENUE, 33RD FLOOR			
City NEW YORK	State NY	Zip Code 10016	
Purpose of Disbursement PLACED MEDIA		Category/Type <input type="checkbox"/>	
Candidate Name		Amount of Each Disbursement this Period 250000	
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. HARRISON, BEAU, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 15 / 2022	
Mailing Address PO BOX 13570			
City ARLINGTON	State VA	Zip Code 22219	
Purpose of Disbursement TRAVEL REIMBURSEMENT: SEE ITEMIZATIONS IF REQUIRED		Category/Type <input type="checkbox"/>	
Candidate Name		Amount of Each Disbursement this Period 692.61	
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. HARRISON, BEAU, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 15 / 2022	
Mailing Address PO BOX 13570			
City ARLINGTON	State VA	Zip Code 22219	
Purpose of Disbursement ADVANCE CONSULTING		Category/Type <input type="checkbox"/>	
Candidate Name		Amount of Each Disbursement this Period 525	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	250692.61
<b>TOTAL</b> This Period (last page this line number only).....	250692.61

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)

**A. UBER**

Mailing Address 1455 MARKET STREET  
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement  
REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
07 / 25 / 2022

FEC Identification Number

C

Transaction ID : SB21B.90398

Amount of Each Disbursement this Period

25.92

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER**

Mailing Address 1455 MARKET STREET  
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement  
REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
07 / 25 / 2022

FEC Identification Number

C

Transaction ID : SB21B.90398

Amount of Each Disbursement this Period

20.48

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER**

Mailing Address 1455 MARKET STREET  
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement  
REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
07 / 27 / 2022

FEC Identification Number

C

Transaction ID : SB21B.90398

Amount of Each Disbursement this Period

21.93

Memo Item

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

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

0.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)

### A. UBER

Mailing Address 1455 MARKET STREET  
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement  
REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 27 / 2022

FEC Identification Number

C

Transaction ID : SB21B.90398

Amount of Each Disbursement this Period

39.33

Memo Item

Full Name (Last, First, Middle Initial)

### B. UBER

Mailing Address 1455 MARKET STREET  
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement  
REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 28 / 2022

FEC Identification Number

C

Transaction ID : SB21B.90398

Amount of Each Disbursement this Period

59.95

Memo Item

Full Name (Last, First, Middle Initial)

### C. HARRIS, CHAMBERLAIN, , ,

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
ADVANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 01 / 2022

FEC Identification Number

C

Transaction ID : SB21B.90111

Amount of Each Disbursement this Period

975

Memo Item

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

975.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. HARRIS, CHAMBERLAIN, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement TRAVEL REIMBURSEMENT: SEE ITEMIZATIONS IF REQUIRED

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 16 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90401

Amount of Each Disbursement this Period: 969.64

Memo Item

**B. HARRIS, CHAMBERLAIN, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement ADVANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 16 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90401

Amount of Each Disbursement this Period: 900

Memo Item

**C. EXXON**

Full Name (Last, First, Middle Initial)

Mailing Address 5959 LAS COLINAS BOULEVARD

City IRVING State TX Zip Code 75039

Purpose of Disbursement REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 07 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90401

Amount of Each Disbursement this Period: 28.39

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 969.64

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. EXXON</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2022
Mailing Address 5959 LAS COLINAS BOULEVARD		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90401</b> Amount of Each Disbursement this Period [REDACTED] 41.25
City IRVING	State TX	Zip Code 75039
Purpose of Disbursement REIMBURSEMENT: TRAVEL: FUEL		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. HARRIS, CHAMBERLAIN, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2022
Mailing Address PO BOX 13570		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90654</b> Amount of Each Disbursement this Period [REDACTED] 933
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement TRAVEL REIMBURSEMENT: SEE ITEMIZATIONS IF REQUIRED		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. HARRIS, CHAMBERLAIN, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2022
Mailing Address PO BOX 13570		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90654</b> Amount of Each Disbursement this Period [REDACTED] 900
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement ADVANCE CONSULTING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 933.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)

**A. UBER**

Mailing Address 1455 MARKET STREET  
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.90654  
Amount of Each Disbursement this Period  
19.05

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER**

Mailing Address 1455 MARKET STREET  
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
08 / 21 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.90654  
Amount of Each Disbursement this Period  
13.95

Memo Item

Full Name (Last, First, Middle Initial)

**C. JUNGERMANN, DAMIAN, , ,**

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement STRATEGY CONSULTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
08 / 29 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.9062:  
Amount of Each Disbursement this Period  
7500

Memo Item

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

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

7500.00





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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. SHEW, ELIZABETH, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 31 / 2022	
Mailing Address PO BOX 13570		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90648</b> Amount of Each Disbursement this Period [REDACTED] 464.86	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type [REDACTED]
Purpose of Disbursement ADVANCE CONSULTING & TRAVEL: MILEAGE			
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. D'ANTUONO, HAYLEY, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2022	
Mailing Address PO BOX 13570		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90120</b> Amount of Each Disbursement this Period [REDACTED] 579.1	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type [REDACTED]
Purpose of Disbursement TRAVEL REIMBURSEMENT: SEE ITEMIZATIONS IF REQUIRED			
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. D'ANTUONO, HAYLEY, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2022	
Mailing Address PO BOX 13570		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90120</b> Amount of Each Disbursement this Period [REDACTED] 525	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type [REDACTED]
Purpose of Disbursement ADVANCE CONSULTING			
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input checked="" type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 579.10
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. D'ANTUONO, HAYLEY, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 19 / 2022	
Mailing Address PO BOX 13570		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90492</b> Amount of Each Disbursement this Period [ ] 944	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type [ ]
Purpose of Disbursement TRAVEL REIMBURSEMENT: SEE ITEMIZATIONS IF REQUIRED		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. D'ANTUONO, HAYLEY, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 19 / 2022	
Mailing Address PO BOX 13570		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90492</b> Amount of Each Disbursement this Period [ ] 300	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type [ ]
Purpose of Disbursement ADVANCE CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. UBER</b>		Date of Disbursement MM / DD / YYYY 08 / 04 / 2022	
Mailing Address 1455 MARKET STREET #400		FEC Identification Number C [ ] <b>Transaction ID : SB21B.90492</b> Amount of Each Disbursement this Period [ ] 38.38	
City SAN FRANCISCO	State CA	Zip Code 94103	Category/ Type [ ]
Purpose of Disbursement REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input checked="" type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 944.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)

**A. AMTRAK**

Mailing Address 60 MASSACHUSETTS AVE NE

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
REIMBURSEMENT: TRAVEL: RAIL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 12 / 2022

FEC Identification Number

C

Transaction ID : SB21B.90492

Amount of Each Disbursement this Period

303

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER**

Mailing Address 1455 MARKET STREET  
#400

City  
SAN FRANCISCO

State  
CA

Zip Code  
94103

Purpose of Disbursement  
REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 14 / 2022

FEC Identification Number

C

Transaction ID : SB21B.90492

Amount of Each Disbursement this Period

19.91

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER**

Mailing Address 1455 MARKET STREET  
#400

City  
SAN FRANCISCO

State  
CA

Zip Code  
94103

Purpose of Disbursement  
REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 17 / 2022

FEC Identification Number

C

Transaction ID : SB21B.90492

Amount of Each Disbursement this Period

28.78

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. AMTRAK**

Full Name (Last, First, Middle Initial)

Mailing Address 60 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement REIMBURSEMENT: TRAVEL: RAIL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 15 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90492

Amount of Each Disbursement this Period: 226

Memo Item

**B. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET #400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 17 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90492

Amount of Each Disbursement this Period: 27.93

Memo Item

**C. SNYDER, JONATHAN, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement TRAVEL REIMBURSEMENT: SEE ITEMIZATIONS IF REQUIRED

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 04 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90166

Amount of Each Disbursement this Period: 1265

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1265.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. SNYDER, JONATHAN, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement ADVANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 04 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90166

Amount of Each Disbursement this Period: 1210

Memo Item

**B. TRI RAIL**

Full Name (Last, First, Middle Initial)

Mailing Address 801 NW 33RD STREET

City POMPANO BEACH State FL Zip Code 33064

Purpose of Disbursement REIMBURSEMENT: TRAVEL: RAIL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 10 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90166

Amount of Each Disbursement this Period: 55

Memo Item

**C. HALLIGAN, LINDSEY, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement EXPENSE REIMBURSEMENT: SEE ITEMIZATIONS IF REQUIRED

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 26 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90498

Amount of Each Disbursement this Period: 2273.93

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2273.93

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial) <b>A. MICROSOFT</b>		Date of Disbursement MM / DD / YYYY 08 / 19 / 2022
Mailing Address ONE MICROSOFT WAY		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90498</b> Amount of Each Disbursement this Period 2273.93
City REDMOND	State WA	Zip Code 98052
Purpose of Disbursement REIMBURSEMENT: OFFICE EQUIPMENT		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. HALLIGAN, LINDSEY, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 25 / 2022
Mailing Address PO BOX 13570		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90496</b> Amount of Each Disbursement this Period 2706.52
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement TRAVEL REIMBURSEMENT: SEE ITEMIZATIONS IF REQUIRED		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. UBER</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2022
Mailing Address 1455 MARKET STREET #400		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.90496</b> Amount of Each Disbursement this Period 31.38
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2706.52
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)

**A. UBER**

Mailing Address 1455 MARKET STREET  
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 04 / 2022

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.90496

Amount of Each Disbursement this Period

[REDACTED] 133.81

Memo Item

Full Name (Last, First, Middle Initial)

**B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 05 / 2022

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.90496

Amount of Each Disbursement this Period

[REDACTED] 416.98

Memo Item

Full Name (Last, First, Middle Initial)

**C. MARRIOTT INTERNATIONAL**

Mailing Address 10400 FERNWOOD RD

City BETHESDA State MD Zip Code 20817

Purpose of Disbursement REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 18 / 2022

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.90496

Amount of Each Disbursement this Period

[REDACTED] 628.15

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)

## A. EXPEDIA

Mailing Address 333 108TH AVENUE

City  
BELLEVUE

State  
WA

Zip Code  
98004

Purpose of Disbursement  
REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.90496

Amount of Each Disbursement this Period

[REDACTED]	778.2
------------	-------

Memo Item

Full Name (Last, First, Middle Initial)

## B. UNITED AIRLINES

Mailing Address 233 S WACKER DRIVE

City  
CHICAGO

State  
IL

Zip Code  
60606

Purpose of Disbursement  
REIMBURSEMENT: CREDIT: TRAVEL AIR

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	9		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.90496

Amount of Each Disbursement this Period

[REDACTED]	- 84
------------	------

Memo Item

Full Name (Last, First, Middle Initial)

## C. SOUTHERN DISTRICT COURT OF FLORIDA

Mailing Address 299 E BROWARD BLVD

City  
FORT LAUDERDALE

State  
FL

Zip Code  
33301

Purpose of Disbursement  
REIMBURSEMENT: FILING FEES

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:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.90496

Amount of Each Disbursement this Period

[REDACTED]	802
------------	-----

Memo Item

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

[REDACTED]	0.00
------------	------

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

[REDACTED]	
------------	--



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. HALLIGAN, LINDSEY, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement TRAVEL REIMBURSEMENT: SEE ITEMIZATIONS IF REQUIRED

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 31 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90652

Amount of Each Disbursement this Period: 2304.79

Memo Item

**B. THE BREAKERS**

Full Name (Last, First, Middle Initial)

Mailing Address 1 SOUTH COUNTY ROAD

City PALM BEACH State FL Zip Code 33480

Purpose of Disbursement REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 29 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90652

Amount of Each Disbursement this Period: 2164

Memo Item

**C. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET #400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 26 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90652

Amount of Each Disbursement this Period: 16.94

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2304.79

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)

### A. UBER

Mailing Address 1455 MARKET STREET  
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement  
REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 26 / 2022

FEC Identification Number

C

Transaction ID : SB21B.90652

Amount of Each Disbursement this Period

11.12

Memo Item

Full Name (Last, First, Middle Initial)

### B. UBER

Mailing Address 1455 MARKET STREET  
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement  
REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 26 / 2022

FEC Identification Number

C

Transaction ID : SB21B.90652

Amount of Each Disbursement this Period

8.12

Memo Item

Full Name (Last, First, Middle Initial)

### C. UBER

Mailing Address 1455 MARKET STREET  
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement  
REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 24 / 2022

FEC Identification Number

C

Transaction ID : SB21B.90652

Amount of Each Disbursement this Period

11.91

Memo Item

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)

**A. UBER**

Mailing Address 1455 MARKET STREET  
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement  
REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
08 / 24 / 2022

FEC Identification Number

C  
Transaction ID : **SB21B.90652**  
Amount of Each Disbursement this Period  
69.96

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER**

Mailing Address 1455 MARKET STREET  
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement  
REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
08 / 26 / 2022

FEC Identification Number

C  
Transaction ID : **SB21B.90652**  
Amount of Each Disbursement this Period  
15.94

Memo Item

Full Name (Last, First, Middle Initial)

**C. BALL, LUKE, , ,**

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
TRAVEL REIMBURSEMENT: SEE ITEMIZATIONS IF REQUIRED

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
08 / 22 / 2022

FEC Identification Number

C  
Transaction ID : **SB21B.9050t**  
Amount of Each Disbursement this Period  
2162.19

Memo Item

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

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

2162.19

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. BALL, LUKE, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement ADVANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 22 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90500

Amount of Each Disbursement this Period: 525

Memo Item

**B. ENTERPRISE RENT A CAR**

Full Name (Last, First, Middle Initial)

Mailing Address 600 CORPORATE PARK DRIVE

City ST LOUIS State MO Zip Code 63105

Purpose of Disbursement REIMBURSEMENT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 06 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90500

Amount of Each Disbursement this Period: 410.94

Memo Item

**C. UNITED AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 233 S WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement REIMBURSEMENT: TRAVEL: BAGGAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 03 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90500

Amount of Each Disbursement this Period: 35

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)  
**A. GRAB N GO**

Date of Disbursement: MM / DD / YYYY  
07 / 23 / 2022

Mailing Address 1600 S 17TH ST

City WACO State TX Zip Code 76706

Purpose of Disbursement REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

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

State: District:

FEC Identification Number: C  
Transaction ID : SB21B.90500  
Amount of Each Disbursement this Period: 53.42

Memo Item

Full Name (Last, First, Middle Initial)  
**B. MARRIOTT INTERNATIONAL**

Date of Disbursement: MM / DD / YYYY  
08 / 03 / 2022

Mailing Address 10400 FERNWOOD RD

City BETHESDA State MD Zip Code 20817

Purpose of Disbursement REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

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

State: District:

FEC Identification Number: C  
Transaction ID : SB21B.90500  
Amount of Each Disbursement this Period: 907.83

Memo Item

Full Name (Last, First, Middle Initial)  
**C. NATIONAL RENTAL CAR**

Date of Disbursement: MM / DD / YYYY  
07 / 21 / 2022

Mailing Address 8420 ST. JOHN INDUSTRIAL DRIVE

City ST.LOUIS State MO Zip Code 63114

Purpose of Disbursement REIMBURSEMENT: TRAVEL: CAR RENTAL

Candidate Name

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

State: District:

FEC Identification Number: C  
Transaction ID : SB21B.90500  
Amount of Each Disbursement this Period: 209.2

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. PHILLIPS 66**

Full Name (Last, First, Middle Initial)

Mailing Address 2331 CITYWEST BLVD

City HOUSTON State TX Zip Code 77042

Purpose of Disbursement REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 06 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90500

Amount of Each Disbursement this Period: 20.8

Memo Item

**B. MARTIN, MARGO, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement TRAVEL REIMBURSEMENT: SEE ITEMIZATIONS IF REQUIRED

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 10 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90329

Amount of Each Disbursement this Period: 694

Memo Item

**C. MARTIN, MARGO, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement ADVANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 10 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90325

Amount of Each Disbursement this Period: 525

Memo Item

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

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

694.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)

**A. SUNPASS**

Mailing Address 9405 W COLONIAL DRIVE

City  
OCOE

State  
FL

Zip Code  
34761

Purpose of Disbursement  
REIMBURSEMENT: TRAVEL: PARKING EXPENSE

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.90329**  
Amount of Each Disbursement this Period  
[ ] 104

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  
REIMBURSEMENT: TRAVEL: BAGGAGE FEE

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
0	8		0	7		2	0	2	2

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.90329**  
Amount of Each Disbursement this Period  
[ ] 35

Memo Item

Full Name (Last, First, Middle Initial)

**C. UNITED AIRLINES**

Mailing Address 233 S WACKER DRIVE

City  
CHICAGO

State  
IL

Zip Code  
60606

Purpose of Disbursement  
REIMBURSEMENT: TRAVEL: BAGGAGE FEE

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
0	8		0	7		2	0	2	2

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.90329**  
Amount of Each Disbursement this Period  
[ ] 30

Memo Item

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

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

[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
						0	0	0	0

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. HARP, NATALIE, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement TRAVEL REIMBURSEMENT: SEE ITEMIZATIONS IF REQUIRED

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 01 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90119

Amount of Each Disbursement this Period: 121.8

Memo Item

**B. EXXON**

Full Name (Last, First, Middle Initial)

Mailing Address 5959 LAS COLINAS BOULEVARD

City IRVING State TX Zip Code 75039

Purpose of Disbursement REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 15 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90119

Amount of Each Disbursement this Period: 53.3

Memo Item

**C. TARGET**

Full Name (Last, First, Middle Initial)

Mailing Address 1000 NICOLLET MALL

City MINNEAPOLIS State MN Zip Code 55403

Purpose of Disbursement REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 14 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90119

Amount of Each Disbursement this Period: 30.9

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 121.80

**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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

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

Mailing Address **475 LENFANT PLZ SW**

City **WASHINGTON** State **DC** Zip Code **20260**

Purpose of Disbursement  
**REIMBURSEMENT: POSTAGE**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: **07 / 15 / 2022**

FEC Identification Number: **C**  
**Transaction ID : SB21B.90119**  
Amount of Each Disbursement this Period: **26.95**

Memo Item

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

Mailing Address **440 TERRY AVE. NORTH**

City **SEATTLE** State **WA** Zip Code **98109**

Purpose of Disbursement  
**REIMBURSEMENT: OFFICE SUPPLIES**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: **07 / 14 / 2022**

FEC Identification Number: **C**  
**Transaction ID : SB21B.90119**  
Amount of Each Disbursement this Period: **10.65**

Memo Item

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

Mailing Address **PO BOX 13570**

City **ARLINGTON** State **VA** Zip Code **22219**

Purpose of Disbursement  
**ADVANCE CONSULTING**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: **08 / 04 / 2022**

FEC Identification Number: **C**  
**Transaction ID : SB21B.90217**  
Amount of Each Disbursement this Period: **1200**

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ **1200.00**

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. NAUTA, WALTINE, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement TRAVEL REIMBURSEMENT: SEE ITEMIZATIONS IF REQUIRED

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 16 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90417

Amount of Each Disbursement this Period: 1270

Memo Item

**B. NAUTA, WALTINE, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement ADVANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 16 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90417

Amount of Each Disbursement this Period: 1125

Memo Item

**C. SHELL**

Full Name (Last, First, Middle Initial)

Mailing Address 910 LOUISIANA STREET

City HOUSTON State TX Zip Code 77002

Purpose of Disbursement REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 04 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90417

Amount of Each Disbursement this Period: 50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1270.00

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. AMAZON**

Full Name (Last, First, Middle Initial)

Mailing Address 440 TERRY AVE. NORTH

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 01 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90403

Amount of Each Disbursement this Period: 30.65

Memo Item

**B. AMAZON**

Full Name (Last, First, Middle Initial)

Mailing Address 440 TERRY AVE. NORTH

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 01 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90403

Amount of Each Disbursement this Period: 20.03

Memo Item

**C. AMAZON**

Full Name (Last, First, Middle Initial)

Mailing Address 440 TERRY AVE. NORTH

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 03 / 2022

FEC Identification Number: C

Transaction ID : SB21B.90403

Amount of Each Disbursement this Period: 14.92

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

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

Date of Disbursement: MM / DD / YYYY  
08 / 03 / 2022

Mailing Address 440 TERRY AVE. NORTH

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

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

State: District:

FEC Identification Number: C  
Transaction ID : SB21B.90403  
Amount of Each Disbursement this Period: 22.99

Memo Item

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

Date of Disbursement: MM / DD / YYYY  
08 / 07 / 2022

Mailing Address 440 TERRY AVE. NORTH

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

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

State: District:

FEC Identification Number: C  
Transaction ID : SB21B.90403  
Amount of Each Disbursement this Period: 8.67

Memo Item

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

Date of Disbursement: MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

FEC Identification Number: C  
Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

**TOTAL** This Period (last page this line number only)..... ▶ 6196422.28

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. WYOMING VALUES**

Full Name (Last, First, Middle Initial)

Mailing Address 824 S MILLEDGE AVE, STE 101

City ATHENS State GA Zip Code 30605

Purpose of Disbursement FEDERAL CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 03 / 2022

FEC Identification Number: C00788877

Transaction ID : SB23.902107

Amount of Each Disbursement this Period: 150000

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	150000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	150000.00

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

**A. HENDRICKS, MARY, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 9814 EAGLE HILL LANE

City SAINT LOUIS State MO Zip Code 63127

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 31 / 2022

FEC Identification Number: C

Transaction ID : SB28A.90670

Amount of Each Disbursement this Period: 133.32

Memo Item

**B. HATFIELD, RAYMOND, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1223 NEWMANS BRANCH ROAD

City MILTON State WV Zip Code 25541

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 31 / 2022

FEC Identification Number: C

Transaction ID : SB28A.90670

Amount of Each Disbursement this Period: 4

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	137.32
<b>TOTAL</b> This Period (last page this line number only).....▶	137.32

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

Full Name (Last, First, Middle Initial)  
**A. CHIPPEWA COUNTY REPUBLICAN PARTY**

Date of Disbursement: MM / DD / YYYY  
08 / 31 / 2022

Mailing Address 6682 210TH ST

City CADOTT State WI Zip Code 54727

Purpose of Disbursement NON-FEDERAL CONTRIBUTION

Candidate Name

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

State: District:

FEC Identification Number: C  
Transaction ID : SB29.906604  
Amount of Each Disbursement this Period: 5000

Memo Item

Full Name (Last, First, Middle Initial)  
**B. REPUBLICAN PARTY OF FLORENCE COUNTY**

Date of Disbursement: MM / DD / YYYY  
08 / 31 / 2022

Mailing Address PO BOX 595

City FLORENCE State WI Zip Code 54121

Purpose of Disbursement NON-FEDERAL CONTRIBUTION

Candidate Name

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

State: District:

FEC Identification Number: C  
Transaction ID : SB29.906601  
Amount of Each Disbursement this Period: 5000

Memo Item

Full Name (Last, First, Middle Initial)  
**C. REPUBLICAN PARTY OF LANGLADE COUNTY**

Date of Disbursement: MM / DD / YYYY  
08 / 31 / 2022

Mailing Address PO BOX 463

City ANTIGO State WI Zip Code 54409

Purpose of Disbursement NON-FEDERAL CONTRIBUTION

Candidate Name

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

State: District:

FEC Identification Number: C  
Transaction ID : SB29.906603  
Amount of Each Disbursement this Period: 5000

Memo Item

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



**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 161 OF 161
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**SAVE AMERICA**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>EVENT STRATEGIES, INC.</b>			Nature of Debt (Purpose): AUDIO VISUAL SERVICES, EVENT STAGING EXPENSE, & TRAVEL EXPENSES
Mailing Address 510 KING STREET SUITE 410			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="449914.84"/>	Transaction ID : SD10.883789	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="449914.84"/>	Outstanding Balance at Close of This Period <input type="text" value="0"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>BCVM SERVICES LLC</b>			Nature of Debt (Purpose): RADIO ADVERTISING
Mailing Address 1512 E BROWARD BLVD UNIT 104B			
City FORT LAUDERDALE	State FL	Zip Code 33301	

Outstanding Balance Beginning This Period <input type="text" value="10000"/>	Transaction ID : SD10.900573	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="10000"/>	Outstanding Balance at Close of This Period <input type="text" value="0"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>TMONE LLC DBA MASS MARKETS</b>			Nature of Debt (Purpose): TELECONFERENCE FEES
Mailing Address 2937 SIERRA CT SW			
City IOWA CITY	State IA	Zip Code 52240	

Outstanding Balance Beginning This Period <input type="text" value="40353.59"/>	Transaction ID : SD10.900063	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="40353.59"/>	Outstanding Balance at Close of This Period <input type="text" value="0"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="0.00"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>