

# 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

Making a Responsible Stand for Households in America PAC

ADDRESS (number and street) PO Box 3241

Check if different than previously reported. (ACC) Brentwood TN 37024

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00409276

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input checked="" type="checkbox"/> Jan 31 (YE)                |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> 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:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on M M / D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y Y Y 11 / 24 / 2020 through M M / D D / Y Y Y Y Y Y 12 / 31 / 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Williamson, Les, , ,

Type or Print Name of Treasurer

Signature of Treasurer Williamson, Les, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 01 / 21 / 2021

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

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name

**Making a Responsible Stand for Households in America PAC**

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="2020"/>	<input type="text" value="259266.99"/>	<input type="text" value="259266.99"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="181966.03"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="49000.00"/>	<input type="text" value="373807.26"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="230966.03"/>	<input type="text" value="633074.25"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="25287.07"/>	<input type="text" value="427395.29"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="205678.96"/>	<input type="text" value="205678.96"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Making a Responsible Stand for Households in America PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	28000.00	64850.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	28000.00	64850.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	21000.00	280250.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	49000.00	345100.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	28707.26
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	49000.00	373807.26
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	49000.00	373807.26

**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 .....	15287.07	173270.29
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	15287.07	173270.29
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	215000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	625.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	625.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	38500.00
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)) ..	25287.07	427395.29
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25287.07	427395.29

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	49000.00	345100.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	625.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	49000.00	344475.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	15287.07	173270.29
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	15287.07	173270.29

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

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

NAME OF COMMITTEE (In Full)  
**Making a Responsible Stand for Households in America PAC**

**A. BARLOON, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6048 EDGEWOOD TERRACE  
 City ALEXANDRIA State VA Zip Code 22307-1123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 02 / 2020  
**Transaction ID : SA11A.175022**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**B. BEAMAN, LEE, A., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1525 BROADWAY  
 City NASHVILLE State TN Zip Code 37203-3121  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BEAMAN AUTOMOTIVE GROUP Occupation (for Individual) AUTO DEALER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 17 / 2020  
**Transaction ID : SA11A.175412**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item CONTRIBUTION

**C. DETTWILLER, FRED, , MR., II**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 301 GREAT CIRCLE ROAD  
 City NASHVILLE State TN Zip Code 37228-1703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DETTWILLER DISTRIBUTING CO. Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 17 / 2020  
**Transaction ID : SA11A.175411**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 16
<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)  
**Making a Responsible Stand for Households in America PAC**

**A. ERVIN, JERE, M., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4200 ARUNDEL COURT  
 City NASHVILLE State TN Zip Code 37215-1816  
 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 ▼ 2000.00

Date of Receipt 12 / 31 / 2020  
**Transaction ID : SA11A.176335**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item CONTRIBUTION

**B. GAMBILL, RON, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 127 GILLETTE DR.  
 City FRANKLIN State TN Zip Code 37069-4113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) EDSOUTH FINANCIAL Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 04 / 2020  
**Transaction ID : SA11A.175023**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**C. KORPMAN, RALPH, A., DR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P O BOX 3229  
 City WINDERMERE State FL Zip Code 34786-3229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KMGH Occupation (for Individual) PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 17 / 2020  
**Transaction ID : SA11A.175416**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8000.00
<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 16
	<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)  
**Making a Responsible Stand for Households in America PAC**

**A. LEE, SHERRI, PARKER, MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5555 COVE ISLAND ROAD

City KNOXVILLE	State TN	Zip Code 37919-9310
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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 ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	17	/	2020

**Transaction ID : SA11A.175414**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

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

Mailing Address PO BOX 280300

City NASHVILLE	State TN	Zip Code 37228-0300
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LIPMAN BROTHERS INC	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
7800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	17	/	2020

**Transaction ID : SA11A.175413**

Amount of Each Receipt this Period  
5000.00

Memo Item CONTRIBUTION

OVER LIMITS AMOUNT REFUNDED ON 1/19/2021

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

Mailing Address 3721 TAFT AVENUE

City ALEXANDRIA	State VA	Zip Code 22304-2617
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MEHLMAN VOGEL CASTAGNETTI	Occupation (for Individual) LOBBYIST
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	10	/	2020

**Transaction ID : SA11A.175166**

Amount of Each Receipt this Period  
1500.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7500.00
<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 9 OF 16
<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)  
**Making a Responsible Stand for Households in America PAC**

**A. REID, RANDI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1631 HOBART STREET NORTHWEST  
 City WASHINGTON State DC Zip Code 20009-3704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KOUNTOUPES DENHAM CARR & REID Occupation (for Individual) LOBBYIST  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **12 / 09 / 2020**  
**Transaction ID : SA11A.175165**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**B. SMITH, STEFAN, M., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1938 WELLTON DR.  
 City GERMANTOWN State TN Zip Code 38138-2660  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LEXUS OF MEMPHIS Occupation (for Individual) AUTOMOBILE DEALER  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **12 / 04 / 2020**  
**Transaction ID : SA11A.175024**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item CONTRIBUTION

**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  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5500.00
<b>TOTAL</b> This Period (last page this line number only).....	28000.00

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

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NAME OF COMMITTEE (In Full)  
**Making a Responsible Stand for Households in America PAC**

**A. AMERICA'S HEALTH INSURANCE PLANS, INC. PAC**

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

Mailing Address 601 PENNSYLVANIA AVENUE, NW  
SOUTH BUILDING, SUITE 500

City WASHINGTON State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00106740

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 30 / 2020

**Transaction ID : SA11C.175674**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B. CSX CORPORATION GOOD GOVERNMENT FUND**

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

Mailing Address 1331 PENNSYLVANIA AVENUE NW  
SUITE 560

City WASHINGTON State DC Zip Code 20004-1745

FEC ID number of contributing federal political committee. **C** C00163832

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 30 / 2020

**Transaction ID : SA11C.175671**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. FEDERATION OF AMERICAN HOSPITALS PAC**

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

Mailing Address 750 9TH STREET NW  
SUITE 600

City WASHINGTON State DC Zip Code 20001-4595

FEC ID number of contributing federal political committee. **C** C00002261

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 30 / 2020

**Transaction ID : SA11C.175672**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8500.00
<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 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Making a Responsible Stand for Households in America PAC**

**A. NATIONAL COTTON COUNCIL OF AMERICA**

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

Mailing Address 7193 GOODLETT FARMS PARKWAY

City CORDOVA	State TN	Zip Code 38016-4909
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FEC ID number of contributing federal political committee. **C** C90020850

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2020

**Transaction ID : SA11C.175673**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. NAVIENT CORPORATION PAC**

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

Mailing Address 13865 SUNRISE VALLEY DR.  
SUITE 110

City HERNDON	State VA	Zip Code 20171-6188
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FEC ID number of contributing federal political committee. **C** C00331835

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	17	/	2020

**Transaction ID : SA11C.175415**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C. NEXTERA ENERGY PAC**

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

Mailing Address 700 UNIVERSE BOULEVARD

City JUNO BEACH	State FL	Zip Code 33408-2657
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00064774

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2020

**Transaction ID : SA11C.176336**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)  
**Making a Responsible Stand for Households in America PAC**

**A. NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND**

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

Mailing Address 3 COMMERCIAL PLACE

City NORFOLK	State VA	Zip Code 23510-2108
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00009282

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2020

**Transaction ID : SA11C.175322**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B.**

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

Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

**C.**

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

Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	21000.00

**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)

**Making a Responsible Stand for Households in America PAC**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address 4017 BUENA VISTA ST  
SUITE 109

City DALLAS State TX Zip Code 75204

Purpose of Disbursement  
MERCHANT ACCOUNT FEES

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 07 / 2020

FEC Identification Number

C  
**Transaction ID : SB21B.I1941!**  
Amount of Each Disbursement this Period  
40.30

Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address 4017 BUENA VISTA ST  
SUITE 109

City DALLAS State TX Zip Code 75204

Purpose of Disbursement  
MERCHANT ACCOUNT FEES

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2020

FEC Identification Number

C  
**Transaction ID : SB21B.I1942C**  
Amount of Each Disbursement this Period  
20.30

Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address 4017 BUENA VISTA ST  
SUITE 109

City DALLAS State TX Zip Code 75204

Purpose of Disbursement  
MERCHANT ACCOUNT FEES

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 15 / 2020

FEC Identification Number

C  
**Transaction ID : SB21B.I1943**  
Amount of Each Disbursement this Period  
60.30

Memo Item

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

120.90

**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)

**Making a Responsible Stand for Households in America PAC**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address 4017 BUENA VISTA ST  
SUITE 109

City DALLAS State TX Zip Code 75204

Purpose of Disbursement  
MERCHANT ACCOUNT FEES

Category/  
Type

Candidate Name

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

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
12 / 23 / 2020

FEC Identification Number  
  
**Transaction ID : SB21B.I1945**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 1593 SPRING HILL RD  
SUITE 400

City VIENNA State VA Zip Code 22182

Purpose of Disbursement  
SUBSCRIPTIONS

Category/  
Type

Candidate Name

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

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
12 / 15 / 2020

FEC Identification Number  
  
**Transaction ID : SB21B.I1943f**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. LES WILLIAMSON LLC**

Mailing Address PO BOX 60148

City WASHINGTON State DC Zip Code 20039

Purpose of Disbursement  
COMPLIANCE CONSULTING

Category/  
Type

Candidate Name

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

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
12 / 04 / 2020

FEC Identification Number  
  
**Transaction ID : SB21B.I1935**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Making a Responsible Stand for Households in America PAC**

Full Name (Last, First, Middle Initial)

**A. O'DONNELL AND ASSOCIATES, LTD.**

Mailing Address 829 EMERALD DR

City  
ALEXANDRIA

State  
VA

Zip Code  
22308

Purpose of Disbursement  
COMMUNICATIONS CONSULTING

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			04			2020			

FEC Identification Number

C

**Transaction ID : SB21B.I1935!**  
Amount of Each Disbursement this Period

1250.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. THE ELEVATED GROUP LLC**

Mailing Address 410 FIRST STREET SOUTHEAST  
STE 310

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
FINANCE CONSULTING

003

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			15			2020			

FEC Identification Number

C

**Transaction ID : SB21B.I1943!**  
Amount of Each Disbursement this Period

9060.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. THE PASS GROUP, LLC**

Mailing Address 610 WESTVIEW AVENUE

City  
NASHVILLE

State  
TN

Zip Code  
37205

Purpose of Disbursement  
FINANCE CONSULTING

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			21			2020			

FEC Identification Number

C

**Transaction ID : SB21B.I1943!**  
Amount of Each Disbursement this Period

2380.87

Memo Item

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

12690.87

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

15262.07

**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)

**Making a Responsible Stand for Households in America PAC**

Full Name (Last, First, Middle Initial)

**A. MARCO RUBIO FOR SENATE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		23		2020

Mailing Address 228 S WASHINGTON ST  
STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement CONTRIBUTION

011
Category/ Type

FEC Identification Number

C C00620518

Transaction ID : SB23.I19446

Amount of Each Disbursement this Period

5000.00
---------

Memo Item

Candidate Name

RUBIO, MARCO, , ,

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: FL District:

Full Name (Last, First, Middle Initial)

**B. MARCO RUBIO FOR SENATE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		23		2020

Mailing Address 228 S WASHINGTON ST  
STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement CONTRIBUTION

011
Category/ Type

FEC Identification Number

C C00620518

Transaction ID : SB23.I19447

Amount of Each Disbursement this Period

5000.00
---------

Memo Item

Candidate Name

RUBIO, MARCO, , ,

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: FL District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

FEC Identification Number

C

Amount of Each Disbursement this Period

--

Memo Item

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

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

10000.00
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**TOTAL** This Period (last page this line number only)..... ▶

10000.00
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