

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

AMERICA FIRST ACTION, INC.

ADDRESS (number and street)

1400 Crystal Drive

Suite 850

Check if different  
than previously  
reported. (ACC)

Arlington

VA

22202

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00637512

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☒ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y 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 M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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

PROCH, JON, , ,

Type or Print Name of Treasurer

Signature of Treasurer

PROCH, JON, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

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**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

AMERICA FIRST ACTION, INC.

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 04 / 01 / 2020 To: M M / D D / Y Y Y Y Y Y 04 / 30 / 2020

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> 2020		18154316.68
(b) Cash on Hand at Beginning of Reporting Period.....	25411908.23	
(c) Total Receipts (from Line 19) .....	11578855.71	21018582.27
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	36990763.94	39172898.95
7. Total Disbursements (from Line 31).....	8068367.83	10250502.84
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	28922396.11	28922396.11
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) .....	372605.73	



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)

Page 3

Write or Type Committee Name

**AMERICA FIRST ACTION, INC.**

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	2	0

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).....	11346668.62	20390540.24
(ii) Unitemized .....	207040.82	542602.77
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	11553709.44	20933143.01
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	25000.00	50000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	11578709.44	20983143.01
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	18.49	1659.76
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	127.78	33779.50
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)) .....	11578855.71	21018582.27
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	11578855.71	21018582.27

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

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 .....	2320374.68	4502347.44
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2320374.68	4502347.44
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	5744802.42	5744802.42
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 .....	3190.73	3352.98
(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)).....	3190.73	3352.98
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	8068367.83	10250502.84
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8068367.83	10250502.84

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	11578709.44	20983143.01
34. Total Contribution Refunds (from Line 28(d)) .....	3190.73	3352.98
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	11575518.71	20979790.03
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	2320374.68	4502347.44
37. Offsets to Operating Expenditures (from Line 15, page 3).....	18.49	1659.76
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2320356.19	4500687.68

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

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

FOR LINE NUMBER: PAGE 6 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ABEL, SONJA, , ,

Mailing Address 2184 LILY DR

City  
LOVELANDState  
COZip Code  
80537FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 02 / 2020

Transaction ID : SA11AI.98462

Amount of Each Receipt this Period

19.50

☐ Memo Item

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

B. ABEL, SONJA, , ,

Mailing Address 2184 LILY DR

City  
LOVELANDState  
COZip Code  
80537FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 02 / 2020

Transaction ID : SA11AI.98465

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. ABEL, SONJA, , ,

Mailing Address 2184 LILY DR

City  
LOVELANDState  
COZip Code  
80537FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 02 / 2020

Transaction ID : SA11AI.98470

Amount of Each Receipt this Period

36.77

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

81.27

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ABEL, SONJA, , ,

Mailing Address 2184 LILY DR

City  
LOVELANDState  
COZip Code  
80537FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 09 / 2020

Transaction ID : SA11AI.98468

Amount of Each Receipt this Period

26.35

☐ Memo Item

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

B. ABEL, SONJA, , ,

Mailing Address 2184 LILY DR

City  
LOVELANDState  
COZip Code  
80537FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.89

Date of Receipt

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

Transaction ID : SA11AI.98459

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

C. ABEL, SONJA, , ,

Mailing Address 2184 LILY DR

City  
LOVELANDState  
COZip Code  
80537FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

303.89

Date of Receipt

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

Transaction ID : SA11AI.98460

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

28.35

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. ABEL, SONJA, , ,**

Mailing Address 2184 LILY DR

City  
LOVELAND

State  
CO

Zip Code  
80537

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 ▼

328.89

Date of Receipt

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

Transaction ID : SA11AI.98466

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. ABEL, SONJA, , ,**

Mailing Address 2184 LILY DR

City  
LOVELAND

State  
CO

Zip Code  
80537

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 ▼

363.89

Date of Receipt

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

Transaction ID : SA11AI.98469

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

**C. ABEL, SONJA, , ,**

Mailing Address 2184 LILY DR

City  
LOVELAND

State  
CO

Zip Code  
80537

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 ▼

383.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11AI.98463

Amount of Each Receipt this Period

19.50

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

79.50



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

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

FOR LINE NUMBER: PAGE 9 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ABEL, SONJA, , ,

Mailing Address 2184 LILY DR

City  
LOVELAND

State  
CO

Zip Code  
80537

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 ▼

402.89

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11AI.98464

Amount of Each Receipt this Period

19.50

☐ Memo Item

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

B. ABEL, SONJA, , ,

Mailing Address 2184 LILY DR

City  
LOVELAND

State  
CO

Zip Code  
80537

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 ▼

427.89

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11AI.98467

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. ABEL, SONJA, , ,

Mailing Address 2184 LILY DR

City  
LOVELAND

State  
CO

Zip Code  
80537

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 ▼

464.66

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11AI.98471

Amount of Each Receipt this Period

36.77

☐ Memo Item

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

81.27

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

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

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

FOR LINE NUMBER: PAGE 10 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ABEL, SONJA, , ,

Mailing Address 2184 LILY DR

City  
LOVELANDState  
COZip Code  
80537FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

514.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11AI.98472

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. ABRAMS, JERRY, , ,

Mailing Address 15 ARTEMIS BLVD

City  
MERRITT ISLANDState  
FLZip Code  
32953FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 22 / 2020

Transaction ID : SA11AI.98480

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. ALANIZ, ARTHUR, , ,

Mailing Address 26 CLEAR VISTA DR

City  
PALOS VERDES PENINSULAState  
CAZip Code  
90274FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SEED GROUP, INC.Occupation (for Individual)  
LANDSCAPE ARCHITECT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 17 / 2020

Transaction ID : SA11AI.98547

Amount of Each Receipt this Period

104.48

☐ Memo Item

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

254.48

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

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

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

FOR LINE NUMBER: PAGE 11 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ALBRANT, ANDREW, , ,

Mailing Address 6141 BELLINGHAM CT

City  
BURTONState  
MIZip Code  
48519FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 14 / 2020

Transaction ID : SA11AI.98555

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. ALDERMAN, OMAR, , ,

Mailing Address 100 LYNX

City  
DEVINEState  
TXZip Code  
78016FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.98562

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. ALDRIDGE, DONNA, , ,

Mailing Address 1931 MOCK RD

City  
HIGH POINTState  
NCZip Code  
27265FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 01 / 2020

Transaction ID : SA11AI.98564

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

225.00

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

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ALLEN, BLAIR, , ,

Mailing Address 2601 COLLEGE PKWY

City  
CARSON CITYState  
NVZip Code  
89706FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COMSTOCK VILLAGEOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2020

Transaction ID : SA11AI.98579

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. AMERICA FIRST POLICIES, INC.

Mailing Address 1400 CRYSTAL DRIVE  
STE 850City  
ARLINGTONState  
VAZip Code  
22202FEC 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 ▼

311457.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11AI.111713

Amount of Each Receipt this Period

86420.00

☐ Memo Item

IN-KIND - PAYROLL / OFFICE EXPENSES

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

C. ANDERSON, CHRISTINA, , ,

Mailing Address 47769 MAYA ST

City  
FREMONTState  
CAZip Code  
94539FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 19 / 2020

Transaction ID : SA11AI.98651

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

86700.00

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

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

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

FOR LINE NUMBER: PAGE 13 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ANDERSON, CHRISTINA, , ,

Mailing Address 47769 MAYA ST

City  
FREMONTState  
CAZip Code  
94539FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 24 / 2020

Transaction ID : SA11AI.98652

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. ANDERSON, CLAUDIA, , ,

Mailing Address 1625 W LOIS MEADOWS CT

City  
RIVERTONState  
UTZip Code  
84065FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 14 / 2020

Transaction ID : SA11AI.98653

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. ANDERSON, CLAUDIA, , ,

Mailing Address 1625 W LOIS MEADOWS CT

City  
RIVERTONState  
UTZip Code  
84065FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.98654

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

550.00

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

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

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

FOR LINE NUMBER: PAGE 14 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ANDRIALIS, ROBERT, , ,

Mailing Address 870 UNITED NATIONS PLZ

City  
NEW YORK

State  
NY

Zip Code  
10017

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 ▼

204.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11AI.98703

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. ARFLACK, NORMAN, , ,

Mailing Address 1014 BITTERSWEET LN

City  
FRANKFORT

State  
KY

Zip Code  
40601

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KY DEPT OF VETERANS AFFAIRS

Occupation (for Individual)  
COMMISSIONER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 05 / 2020

Transaction ID : SA11AI.98749

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. ARNO, MARY, , ,

Mailing Address 101 W SUMMIT AVE

City  
SAN ANTONIO

State  
TX

Zip Code  
78212

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 21 / 2020

Transaction ID : SA11AI.98781

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 15 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ASH, MIKAEL, , ,

Mailing Address 611 PRESTWICK DR

City  
DOTHANState  
ALZip Code  
36305FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
U.S. ARMYOccupation (for Individual)  
OPS SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.98812

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. ASHLEY, SHARON, , ,

Mailing Address 32200 N HARBOR DR

City  
FORT BRAGGState  
CAZip Code  
95437FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 19 / 2020

Transaction ID : SA11AI.98822

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

C. ASHLEY, SHARON, , ,

Mailing Address 32200 N HARBOR DR

City  
FORT BRAGGState  
CAZip Code  
95437FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

409.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 19 / 2020

Transaction ID : SA11AI.98823

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

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

500.00

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

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

FOR LINE NUMBER: PAGE 16 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. AUL, DAVID, , ,**

Mailing Address 1195 E PALATINE

City  
ARLINGTON HEIGHTS

State  
IL

Zip Code  
60004

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 18 / 2020

Transaction ID : SA11AI.98852

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. BAHLER, WALTER, , ,**

Mailing Address 5927 S CREEKSIDE CT

City  
REMINGTON

State  
IN

Zip Code  
47977

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 18 / 2020

Transaction ID : SA11AI.98913

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. BAIRD, SAUNDRA, , ,**

Mailing Address 2035 ROCK RIDGE RD

City  
BRANDENBURG

State  
KY

Zip Code  
40108

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 ▼

402.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 23 / 2020

Transaction ID : SA11AI.98938

Amount of Each Receipt this Period

35.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

235.00



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

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

FOR LINE NUMBER: PAGE 17 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BAKER, ROSS, , ,

Mailing Address 4401 TILSON LN

City  
HOUSTONState  
TXZip Code  
77041FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 10 / 2020

Transaction ID : SA11AI.98948

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. BALLQANCE, CHARLOTTE, , ,

Mailing Address 1445 E ASHLAND AVE

City  
MT ZIONState  
ILZip Code  
62549FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 13 / 2020

Transaction ID : SA11AI.98982

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. BARCO, SHARON, , ,

Mailing Address 23 GOLFVIEW PL

City  
ROTONDA WESTState  
FLZip Code  
33947FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BARCOS ACCOUNTING & TAXOccupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11AI.98997

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

275.00

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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BARRETT, ROBERT, , ,

Mailing Address P.O. BOX 82401

City  
CONYERSState  
GAZip Code  
30013FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 03 / 2020

Transaction ID : SA11AI.99036

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

B. BARRETT, ROBERT, , ,

Mailing Address P.O. BOX 82401

City  
CONYERSState  
GAZip Code  
30013FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 14 / 2020

Transaction ID : SA11AI.99034

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. BARRETT, ROBERT, , ,

Mailing Address P.O. BOX 82401

City  
CONYERSState  
GAZip Code  
30013FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 27 / 2020

Transaction ID : SA11AI.99035

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

85.00

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

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

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

FOR LINE NUMBER: PAGE 19 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BARRETT, ROBERT, , ,

Mailing Address P.O. BOX 82401

City  
CONYERS

State  
GA

Zip Code  
30013

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 ▼

396.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2020

Transaction ID : SA11AI.99037

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

B. BASSO, NICHOLAS, P, ,

Mailing Address 68 COACHLIGHT SQ

City  
MONTROSE

State  
NY

Zip Code  
10548

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 05 / 2020

Transaction ID : SA11AI.99071

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. BASSO, NICHOLAS, P, ,

Mailing Address 68 COACHLIGHT SQ

City  
MONTROSE

State  
NY

Zip Code  
10548

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 ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 07 / 2020

Transaction ID : SA11AI.99076

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

60.00

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

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

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

FOR LINE NUMBER: PAGE 20 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. BASSO, NICHOLAS, P, ,**

Mailing Address 68 COACHLIGHT SQ

City  
MONTROSE

State  
NY

Zip Code  
10548

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 ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 07 / 2020

Transaction ID : SA11AI.99077

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

**B. BASSO, NICHOLAS, P, ,**

Mailing Address 68 COACHLIGHT SQ

City  
MONTROSE

State  
NY

Zip Code  
10548

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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 11 / 2020

Transaction ID : SA11AI.99081

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. BASSO, NICHOLAS, P, ,**

Mailing Address 68 COACHLIGHT SQ

City  
MONTROSE

State  
NY

Zip Code  
10548

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 ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 13 / 2020

Transaction ID : SA11AI.99072

Amount of Each Receipt this Period

10.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

50.00

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

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

FOR LINE NUMBER: PAGE 21 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BASSO, NICHOLAS, P, ,

Mailing Address 68 COACHLIGHT SQ

City  
MONTROSEState  
NYZip Code  
10548FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 13 / 2020

Transaction ID : SA11AI.99082

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. BASSO, NICHOLAS, P, ,

Mailing Address 68 COACHLIGHT SQ

City  
MONTROSEState  
NYZip Code  
10548FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2020

Transaction ID : SA11AI.99073

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. BASSO, NICHOLAS, P, ,

Mailing Address 68 COACHLIGHT SQ

City  
MONTROSEState  
NYZip Code  
10548FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2020

Transaction ID : SA11AI.99078

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

50.00

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

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

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

FOR LINE NUMBER: PAGE 22 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. BASSO, NICHOLAS, P, ,**

Mailing Address 68 COACHLIGHT SQ

City  
MONTROSE

State  
NY

Zip Code  
10548

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 ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2020

Transaction ID : SA11AI.99079

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

**B. BASSO, NICHOLAS, P, ,**

Mailing Address 68 COACHLIGHT SQ

City  
MONTROSE

State  
NY

Zip Code  
10548

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 ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 19 / 2020

Transaction ID : SA11AI.99074

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

**C. BASSO, NICHOLAS, P, ,**

Mailing Address 68 COACHLIGHT SQ

City  
MONTROSE

State  
NY

Zip Code  
10548

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 ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.99080

Amount of Each Receipt this Period

15.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

40.00

# **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 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BASSO, NICHOLAS, P, ,

Mailing Address 68 COACHLIGHT SQ

City  
MONTROSEState  
NYZip Code  
10548FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.99075

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. BECKLOFF, JAMES, , ,

Mailing Address 2501 N 22ND ST  
APT 210City  
ROGERSState  
ARZip Code  
72756FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2020

Transaction ID : SA11AI.99158

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. BELCHER, WILLIAM, , ,

Mailing Address 431 VIRGINIA AVE

City  
CAMPBELLState  
CAZip Code  
95008FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AMERICAN RIGGINGOccupation (for Individual)  
RIGGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 14 / 2020

Transaction ID : SA11AI.99196

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

210.00

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

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

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

FOR LINE NUMBER: PAGE 24 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. BENGTON, BRUCE, , ,**

Mailing Address 2 GAELSONG LN

City  
READING

State  
PA

Zip Code  
19610

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 ▼

241.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 08 / 2020

Transaction ID : SA11AI.99233

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. BENGTON, BRUCE, , ,**

Mailing Address 2 GAELSONG LN

City  
READING

State  
PA

Zip Code  
19610

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 ▼

266.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.99234

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. BENISCHEK, ELLEN, , ,**

Mailing Address 3013 TAHITI ST NE

City  
ALBUQUERQUE

State  
NM

Zip Code  
87111

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 07 / 2020

Transaction ID : SA11AI.99247

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

100.00



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

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

FOR LINE NUMBER: PAGE 25 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BENISCHEK, ELLEN, , ,

Mailing Address 3013 TAHITI ST NE

City

ALBUQUERQUE

State

NM

Zip Code

87111

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 ▼

310.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 08 / 2020

Transaction ID : SA11AI.99244

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

B. BENISCHEK, ELLEN, , ,

Mailing Address 3013 TAHITI ST NE

City

ALBUQUERQUE

State

NM

Zip Code

87111

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 ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 09 / 2020

Transaction ID : SA11AI.99248

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. BENISCHEK, ELLEN, , ,

Mailing Address 3013 TAHITI ST NE

City

ALBUQUERQUE

State

NM

Zip Code

87111

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 ▼

385.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 11 / 2020

Transaction ID : SA11AI.99236

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

110.00

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

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

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

FOR LINE NUMBER: PAGE 26 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. BENISCHEK, ELLEN, , ,**

Mailing Address 3013 TAHITI ST NE

City

ALBUQUERQUE

State

NM

Zip Code

87111

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 ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 13 / 2020

Transaction ID : SA11AI.99245

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

**B. BENISCHEK, ELLEN, , ,**

Mailing Address 3013 TAHITI ST NE

City

ALBUQUERQUE

State

NM

Zip Code

87111

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 ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2020

Transaction ID : SA11AI.99246

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

**C. BENISCHEK, ELLEN, , ,**

Mailing Address 3013 TAHITI ST NE

City

ALBUQUERQUE

State

NM

Zip Code

87111

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 ▼

485.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 20 / 2020

Transaction ID : SA11AI.99243

Amount of Each Receipt this Period

30.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 27 OF 282

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. BENISCHEK, ELLEN, , ,**

Mailing Address 3013 TAHITI ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 21 / 2020

Transaction ID : SA11AI.99237

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. BENISCHEK, ELLEN, , ,**

Mailing Address 3013 TAHITI ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

511.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 22 / 2020

Transaction ID : SA11AI.99235

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

**C. BENISCHEK, ELLEN, , ,**

Mailing Address 3013 TAHITI ST NE

City  
ALBUQUERQUEState  
NMZip Code  
87111FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

561.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 22 / 2020

Transaction ID : SA11AI.99249

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

76.00

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

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

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

FOR LINE NUMBER: PAGE 28 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. BENISCHEK, ELLEN, , ,**

Mailing Address 3013 TAHITI ST NE

City

ALBUQUERQUE

State

NM

Zip Code

87111

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 ▼

611.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 22 / 2020

Transaction ID : SA11AI.99250

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. BENISCHEK, ELLEN, , ,**

Mailing Address 3013 TAHITI ST NE

City

ALBUQUERQUE

State

NM

Zip Code

87111

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 ▼

636.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 24 / 2020

Transaction ID : SA11AI.99238

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. BENISCHEK, ELLEN, , ,**

Mailing Address 3013 TAHITI ST NE

City

ALBUQUERQUE

State

NM

Zip Code

87111

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 ▼

661.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 24 / 2020

Transaction ID : SA11AI.99239

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

100.00

# **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 29 OF 282

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. BENISCHEK, ELLEN, , ,**

Mailing Address 3013 TAHITI ST NE

City

ALBUQUERQUE

State

NM

Zip Code

87111

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 ▼

686.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 24 / 2020

Transaction ID : SA11AI.99240

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. BENISCHEK, ELLEN, , ,**

Mailing Address 3013 TAHITI ST NE

City

ALBUQUERQUE

State

NM

Zip Code

87111

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 ▼

711.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 24 / 2020

Transaction ID : SA11AI.99241

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. BENISCHEK, ELLEN, , ,**

Mailing Address 3013 TAHITI ST NE

City

ALBUQUERQUE

State

NM

Zip Code

87111

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 ▼

736.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2020

Transaction ID : SA11AI.99242

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

75.00

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

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

FOR LINE NUMBER: PAGE 30 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BENZING, EDWARD, , ,

Mailing Address 8481 CHESTNUT RIDGE RD

City  
GASPORTState  
NYZip Code  
14066FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 11 / 2020

Transaction ID : SA11AI.99301

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. BENZING, EDWARD, , ,

Mailing Address 8481 CHESTNUT RIDGE RD

City  
GASPORTState  
NYZip Code  
14066FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 22 / 2020

Transaction ID : SA11AI.99302

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

C. BERTAS, MARY, K, ,

Mailing Address 1333 HILLSIDE CIR

City  
CHASKAState  
MNZip Code  
55318FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

855.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11AI.99349

Amount of Each Receipt this Period

151.35

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

211.35

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

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

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

FOR LINE NUMBER: PAGE 31 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. BERTOLOTTI, EUNICE, , ,**

Mailing Address 1283 ESTATE DR

City  
LOS ALTOS

State  
CA

Zip Code  
94024

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.99351

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. BEYER, STEVE, , ,**

Mailing Address 2209 VERSAILLES CT

City  
HENDERSON

State  
NV

Zip Code  
89074

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STEVE BEYER PRODUCTIONS

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 27 / 2020

Transaction ID : SA11AI.99371

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. BIZZOZERO, JOAN, , ,**

Mailing Address 113 DEL MESA DR

City  
CARMEL

State  
CA

Zip Code  
93923

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.99438

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

250.00

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

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

FOR LINE NUMBER: PAGE 32 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BLANCHARD, JAMES, , ,

Mailing Address 6001 RIVER RD  
STE 100

City  
COLUMBUS

State  
GA

Zip Code  
31904

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 ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 07 / 2020

Transaction ID : SA11AI.99458

Amount of Each Receipt this Period

25000.00

☐ Memo Item

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

B. BLANCHFIELD, ROGER, , ,

Mailing Address 767 110TH ST

City  
CHURDAN

State  
IA

Zip Code  
50050

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 03 / 2020

Transaction ID : SA11AI.99462

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. BLANCHFIELD, ROGER, , ,

Mailing Address 767 110TH ST

City  
CHURDAN

State  
IA

Zip Code  
50050

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 ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 21 / 2020

Transaction ID : SA11AI.101959

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

25070.00

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



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

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BLANCHFIELD, ROGER, , ,

Mailing Address 767 110TH ST

City  
CHURDANState  
IAZip Code  
50050FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 28 / 2020

Transaction ID : SA11AI.99463

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. BLANKENSHIP, THOMAS, , ,

Mailing Address 50 E 21ST ST

City  
BAYONNEState  
NJZip Code  
07002FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 18 / 2020

Transaction ID : SA11AI.99470

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. BOLD, STEVE, , ,

Mailing Address 17109 NE 183RD PL

City  
WOODINVILLEState  
WAZip Code  
98072FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.99521

Amount of Each Receipt this Period

260.73

☐ Memo Item

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

335.73

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

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BOLE, RICHARD, , ,

Mailing Address 7581 CHELSEA LN

City  
GATES MILLSState  
OHZip Code  
44040FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 21 / 2020

Transaction ID : SA11AI.99525

Amount of Each Receipt this Period

104.48

☐ Memo Item

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

B. BOLE, RICHARD, , ,

Mailing Address 7581 CHELSEA LN

City  
GATES MILLSState  
OHZip Code  
44040FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.99524

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. BORNSTEIN, RICHARD, , ,

Mailing Address 2 SLOANS CURVE DR

City  
PALM BEACHState  
FLZip Code  
33480FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE KOFFLER GROUPOccupation (for Individual)  
CEO

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  
04 / 18 / 2020

Transaction ID : SA11AI.99572

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

5204.48

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 35 OF 282  
(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)

**AMERICA FIRST ACTION, INC.**

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

**A. BOYLE, PHILLIP, , ,**

Mailing Address 10 TOWN PLZ 307

City  
DURANGOState  
COZip Code  
81301FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
ADVANCE FIRE SYSTEMS, INC.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2020

Transaction ID : SA11AI.99658

Amount of Each Receipt this Period

104.48

☐ Memo Item

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

**B. BRADLEY, EDWARD, , ,**

Mailing Address 204 LARKIN LN

City  
WALLINGFORDState  
PAZip Code  
19086FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1580.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		02		2020

Transaction ID : SA11AI.99673

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. BRADLEY, EDWARD, , ,**

Mailing Address 204 LARKIN LN

City  
WALLINGFORDState  
PAZip Code  
19086FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1680.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		07		2020

Transaction ID : SA11AI.99674

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

304.48

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BRADLEY, EDWARD, , ,

Mailing Address 204 LARKIN LN

City  
WALLINGFORD

State  
PA

Zip Code  
19086

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 ▼

1780.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 08 / 2020

Transaction ID : SA11AI.99675

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. BRADLEY, EDWARD, , ,

Mailing Address 204 LARKIN LN

City  
WALLINGFORD

State  
PA

Zip Code  
19086

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 ▼

1880.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 13 / 2020

Transaction ID : SA11AI.99676

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. BRADLEY, EDWARD, , ,

Mailing Address 204 LARKIN LN

City  
WALLINGFORD

State  
PA

Zip Code  
19086

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 ▼

1970.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 21 / 2020

Transaction ID : SA11AI.99672

Amount of Each Receipt this Period

90.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

290.00

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

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

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

FOR LINE NUMBER: PAGE 37 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. BRADLEY, EDWARD, , ,**

Mailing Address 204 LARKIN LN

City  
WALLINGFORD

State  
PA

Zip Code  
19086

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 ▼

2070.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 22 / 2020

Transaction ID : SA11AI.99677

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. BRADLEY, EDWARD, , ,**

Mailing Address 204 LARKIN LN

City  
WALLINGFORD

State  
PA

Zip Code  
19086

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 ▼

2170.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.99678

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. BRADLEY, EDWARD, , ,**

Mailing Address 204 LARKIN LN

City  
WALLINGFORD

State  
PA

Zip Code  
19086

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 ▼

2270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 27 / 2020

Transaction ID : SA11AI.99679

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

300.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BRADLEY, EDWARD, , ,

Mailing Address 204 LARKIN LN

City  
WALLINGFORDState  
PAZip Code  
19086FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2370.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.99680

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. BRENNAN, BERNARD, , ,

Mailing Address 133 SPENCER DR

City  
AMHERSTState  
MAZip Code  
01004FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 21 / 2020

Transaction ID : SA11AI.99732

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. BRIDGES, BRUCE, , ,

Mailing Address 275 FARENHOLT AVE  
STE GCity  
BARRIGADAState  
GUZip Code  
96913FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BJ PETOccupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 23 / 2020

Transaction ID : SA11AI.99749

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

450.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BRIDGES, BRUCE, , ,

Mailing Address 275 FARENHOLT AVE  
 STE G

City  
 BARRIGADA

State  
 GU

Zip Code  
 96913

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

BJ PET

Occupation (for Individual)

SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 04 / 23 / 2020

Transaction ID : SA11AI.99751

Amount of Each Receipt this Period

4.99

☐ Memo Item

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

B. BRIDGES, BRUCE, , ,

Mailing Address 275 FARENHOLT AVE  
 STE G

City  
 BARRIGADA

State  
 GU

Zip Code  
 96913

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

BJ PET

Occupation (for Individual)

SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 04 / 23 / 2020

Transaction ID : SA11AI.99752

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. BRIDGES, BRUCE, , ,

Mailing Address 275 FARENHOLT AVE  
 STE G

City  
 BARRIGADA

State  
 GU

Zip Code  
 96913

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

BJ PET

Occupation (for Individual)

SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

264.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 04 / 23 / 2020

Transaction ID : SA11AI.99753

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

14.99

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BRIDGES, BRUCE, , ,

Mailing Address 275 FARENHOLT AVE  
STE G

City  
BARRIGADA

State  
GU

Zip Code  
96913

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BJ PET

Occupation (for Individual)

SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

514.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 23 / 2020

Transaction ID : SA11AI.99754

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. BRIDGES, BRUCE, , ,

Mailing Address 275 FARENHOLT AVE  
STE G

City  
BARRIGADA

State  
GU

Zip Code  
96913

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BJ PET

Occupation (for Individual)

SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 24 / 2020

Transaction ID : SA11AI.99748

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

C. BROWN, LOWELL, , ,

Mailing Address 800 GARCIA ST

City  
SANTA FE

State  
NM

Zip Code  
87505

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 01 / 2020

Transaction ID : SA11AI.99857

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

501.00



# **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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. BUCHANAN, DENNIS, , ,**

Mailing Address 6790 MONARDA CT

City  
HOUSTON

State  
TX

Zip Code  
77069

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 / D D / Y Y Y Y Y Y  
04 / 02 / 2020

Transaction ID : SA11AI.99908

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**B. BUSSA, STEPHEN, , ,**

Mailing Address 15151 FORD RD  
APT 114

City  
DEARBORN

State  
MI

Zip Code  
48126

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 21 / 2020

Transaction ID : SA11AI.100006

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. BYRNES, TIM, M, ,**

Mailing Address 696 SLATER DR

City  
FAIRBANKS

State  
AK

Zip Code  
99701

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KINROSS INC.

Occupation (for Individual)  
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11AI.100044

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1050.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. CALDERON, ERNESTINA, , ,**

Mailing Address 146 ROCK HILL CHURCH RD

City  
STAFFORD

State  
VA

Zip Code  
22556

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DON

Occupation (for Individual)  
LOG MGMT SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11Al.100077

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. CAMP, ELIZABETH, , ,**

Mailing Address 1615 HANDY RD

City  
NEWNAN

State  
GA

Zip Code  
30263

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 05 / 2020

Transaction ID : SA11Al.100114

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. CANTARELLA, SALVATORE, , ,**

Mailing Address 100 CENTRAL AVE

City  
SARASOTA

State  
FL

Zip Code  
34236

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AXA

Occupation (for Individual)  
INSURANCE UNDERWRITER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 03 / 2020

Transaction ID : SA11Al.100135

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

450.00

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

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

FOR LINE NUMBER: PAGE 43 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. CANTRELL, ROBERT, D, ,

Mailing Address 5079 HARMONY RD

City  
CRYSTAL SPRINGS

State  
MS

Zip Code  
39059

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KIRBY INLAND MARINE

Occupation (for Individual)  
CAPTAIN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 18 / 2020

Transaction ID : SA11Al.100141

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. CARL, JEFFREY, , ,

Mailing Address 622 GRAND ISLAND DR

City  
LAKE HAVASU CITY

State  
AZ

Zip Code  
86403

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 ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 07 / 2020

Transaction ID : SA11Al.100173

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. CARLSON, CRAIG, , ,

Mailing Address 960 CAPE MARCO DR  
#904

City  
MARCO ISLAND

State  
FL

Zip Code  
34145

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11Al.100177

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

450.00

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

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. CARRUTHERS, ROGER, , ,

Mailing Address 2649 EARLY LIGHT DR

City  
LAS VEGASState  
NVZip Code  
89142FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 07 / 2020

Transaction ID : SA11AI.100220

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. CHERNYAK, MARINA, , ,

Mailing Address 35935 KING EDWARD DR

City  
FARMINGTON HILLSState  
MIZip Code  
48331FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
1001SHOPS.COMOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.100386

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. CHIAVAROLI, JOYCE, , ,

Mailing Address 15353 BURBANK DR  
#6City  
BROOKSVILLEState  
FLZip Code  
34604FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

387.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 13 / 2020

Transaction ID : SA11AI.100398

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

200.00

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

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

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(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)

AMERICA FIRST ACTION, INC.

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

A. CHIAVAROLI, JOYCE, , ,

Mailing Address 15353 BURBANK DR

#6

City

BROOKSVILLE

State

FL

Zip Code

34604

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 ▼

412.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2020

Transaction ID : SA11AI.100397

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. CHRISTOFERSON, OWEN, , ,

Mailing Address 79 NOTTINGHAM TER

City

BUFFALO

State

NY

Zip Code

14216

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
04	/	25	/	2020

Transaction ID : SA11AI.100424

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. CLAYBURN, TERRY, , ,

Mailing Address 1808 NORTH HIGH AVE

City

FAYETTEVILLE

State

AR

Zip Code

72704

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CLAYBURN HVAC

Occupation (for Individual)

TECH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	01	/	2020

Transaction ID : SA11AI.100479

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

625.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. COATES, THOMAS, , ,

Mailing Address 7370 SW GRIDLEY RD

City  
STEWARTSVILLE

State  
MO

Zip Code  
64490

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11Al.100512

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. COATNEY, RICHARD, , ,

Mailing Address 130 CYPRESS POINT COURT

City  
APTOS

State  
CA

Zip Code  
95003

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11Al.100513

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. COHEN, SHERRYL, , ,

Mailing Address 680 SALEM END ROAD

City  
FRAMINGHAM

State  
MA

Zip Code  
01702

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 01 / 2020

Transaction ID : SA11Al.100534

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

450.00

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

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

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

FOR LINE NUMBER: PAGE 47 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. COLE, JOHN, , ,**

Mailing Address 2523 E 2830 S

City  
SAINT GEORGE

State  
UT

Zip Code  
84790

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 ▼

208.46

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.100549

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

**B. COLEMAN, NORMAN, , ,**

Mailing Address 1232 POTOMAC SCHOOL RD

City  
MCLEAN

State  
VA

Zip Code  
22101

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 ▼

206.00

Date of Receipt

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

Transaction ID : SA11AI.100575

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**C. CONNOLLY, CYNTHIA, , ,**

Mailing Address 7998 W 111TH AVE

City  
WESTMINSTER

State  
CO

Zip Code  
80021

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CONNOLLY'S TOWING, INC.

Occupation (for Individual)  
ACCOUNTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 20 / 2020

Transaction ID : SA11AI.100647

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

160.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. COONEY, ROSEANN, , ,

Mailing Address 113 VALLEYVIEW CIRCLE

City  
PHOENIXVILLE

State  
PA

Zip Code  
19460

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COONEY PROVISIONS

Occupation (for Individual)  
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.100686

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. COWART, DONALD, , ,

Mailing Address 2817 TURNBERRY DR  
#515

City  
ARLINGTON

State  
TX

Zip Code  
76006

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 ▼

204.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 13 / 2020

Transaction ID : SA11AI.100751

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. CRAIG, ROGER, , ,

Mailing Address 118 HUMP RD

City  
HAGERSTOWN

State  
MD

Zip Code  
21740

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CPI

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

299.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2020

Transaction ID : SA11AI.100781

Amount of Each Receipt this Period

145.00

☐ Memo Item

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

295.00

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



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 49 OF 282

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

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. CRAIN, TIMOTHY, , ,**

Mailing Address 2609 PICKWICK LN

City  
PLANOState  
TXZip Code  
75093FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TSC AVIATIONOccupation (for Individual)  
PRESIDENT/CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

**Transaction ID : SA11AI.100789**

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

**B. CROUCH, BILL, , ,**

Mailing Address P.O. BOX 161866

City  
AUSTINState  
TXZip Code  
78716FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2020

**Transaction ID : SA11AI.100833**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. CURRAN, WILLIAM, , ,**

Mailing Address 200 LEEDER HILL DR

City  
HAMDENState  
CTZip Code  
06517FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

**Transaction ID : SA11AI.100913**

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

675.00

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

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

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

FOR LINE NUMBER: PAGE 50 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DALEO, DAVID, , ,

Mailing Address 994 HARWOOD ST

City  
ORANGE

State  
CA

Zip Code  
92867

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DALEO ENTERPRISES

Occupation (for Individual)  
PROPERTY MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 18 / 2020

Transaction ID : SA11AI.100956

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. DAVIS, DAVE, , ,

Mailing Address 500 GRAND AVE PKWY

City  
PFLUGERVILLE

State  
TX

Zip Code  
78660

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 ▼

601.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 08 / 2020

Transaction ID : SA11AI.101034

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

C. DAVIS, DAVE, , ,

Mailing Address 500 GRAND AVE PKWY

City  
PFLUGERVILLE

State  
TX

Zip Code  
78660

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 ▼

651.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 08 / 2020

Transaction ID : SA11AI.101040

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

151.00

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

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 OF 282

(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)

AMERICA FIRST ACTION, INC.

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

A. DAVIS, DAVE, , ,

Mailing Address 500 GRAND AVE PKWY

City  
PFLUGERVILLEState  
TXZip Code  
78660FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

701.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	08	/	2020

Transaction ID : SA11Al.101041

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. DAVIS, DAVE, , ,

Mailing Address 500 GRAND AVE PKWY

City  
PFLUGERVILLEState  
TXZip Code  
78660FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

711.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	11	/	2020

Transaction ID : SA11Al.101037

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. DAVIS, DAVE, , ,

Mailing Address 500 GRAND AVE PKWY

City  
PFLUGERVILLEState  
TXZip Code  
78660FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

715.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2020

Transaction ID : SA11Al.101035

Amount of Each Receipt this Period

4.99

☐ Memo Item

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

64.99

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

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

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

FOR LINE NUMBER: PAGE 52 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. DAVIS, DAVE, , ,**

Mailing Address 500 GRAND AVE PKWY

City  
PFLUGERVILLE

State  
TX

Zip Code  
78660

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 ▼

720.99

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.101036

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

**B. DAVIS, DAVE, , ,**

Mailing Address 500 GRAND AVE PKWY

City  
PFLUGERVILLE

State  
TX

Zip Code  
78660

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 ▼

747.34

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.101038

Amount of Each Receipt this Period

26.35

☐ Memo Item

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

**C. DAVIS, DAVE, , ,**

Mailing Address 500 GRAND AVE PKWY

City  
PFLUGERVILLE

State  
TX

Zip Code  
78660

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 ▼

773.69

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.101039

Amount of Each Receipt this Period

26.35

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

57.70

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

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

FOR LINE NUMBER: PAGE 53 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. DEBILL, WALTER, , ,**

Mailing Address 9102 SAN DIEGO RD

City  
AUSTIN

State  
TX

Zip Code  
78737

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 23 / 2020

Transaction ID : SA11AI.101128

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. DEL ROSARIO, MICHAEL, , ,**

Mailing Address P.O. BOX 6333

City  
KANE OHE

State  
HI

Zip Code  
96744

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 ▼

205.00

Date of Receipt

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

Transaction ID : SA11AI.101182

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

**C. DEL ROSARIO, MICHAEL, , ,**

Mailing Address P.O. BOX 6333

City  
KANE OHE

State  
HI

Zip Code  
96744

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2020

Transaction ID : SA11AI.101183

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

85.00

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

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

FOR LINE NUMBER: PAGE 54 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DEL ROSARIO, MICHAEL, , ,

Mailing Address P.O. BOX 6333

City  
KANE OHEState  
HIZip Code  
96744FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 19 / 2020

Transaction ID : SA11Al.101185

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

B. DEL ROSARIO, MICHAEL, , ,

Mailing Address P.O. BOX 6333

City  
KANE OHEState  
HIZip Code  
96744FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11Al.101180

Amount of Each Receipt this Period

4.99

☐ Memo Item

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

C. DEL ROSARIO, MICHAEL, , ,

Mailing Address P.O. BOX 6333

City  
KANE OHEState  
HIZip Code  
96744FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

274.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11Al.101181

Amount of Each Receipt this Period

5.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

44.99

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

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

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

FOR LINE NUMBER: PAGE 55 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DEL ROSARIO, MICHAEL, , ,

Mailing Address P.O. BOX 6333

City  
KANE OHEState  
HIZip Code  
96744FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.34

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.101184

Amount of Each Receipt this Period

26.35

☐ Memo Item

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

B. DEL ROSARIO, MICHAEL, , ,

Mailing Address P.O. BOX 6333

City  
KANE OHEState  
HIZip Code  
96744FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.74

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.101186

Amount of Each Receipt this Period

52.40

☐ Memo Item

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

C. DEL ROSARIO, MICHAEL, , ,

Mailing Address P.O. BOX 6333

City  
KANE OHEState  
HIZip Code  
96744FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

406.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.101187

Amount of Each Receipt this Period

52.40

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

131.15

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

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

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

FOR LINE NUMBER: PAGE 56 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DENTON, DAYTON, , ,

Mailing Address 29510 W HAWTHORNE DR

City  
SPRINGState  
TXZip Code  
77386FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (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  
04 / 24 / 2020

Transaction ID : SA11AI.101236

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. DEPARIS, FREDERIC, , ,

Mailing Address 540 HOWE ST

City  
METHUENState  
MAZip Code  
01844FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 03 / 2020

Transaction ID : SA11AI.101249

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. DESIMONE, FRANCES, , ,

Mailing Address 101-15 SHELDRAKE PL

City  
MAMARONECKState  
NYZip Code  
10543FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.101276

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

650.00



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

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

FOR LINE NUMBER: PAGE 57 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City  
JACKSONVILLE

State  
FL

Zip Code  
32205

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 ▼

662.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 01 / 2020

Transaction ID : SA11AI.101359

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City  
JACKSONVILLE

State  
FL

Zip Code  
32205

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 ▼

672.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 01 / 2020

Transaction ID : SA11AI.101360

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City  
JACKSONVILLE

State  
FL

Zip Code  
32205

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 ▼

677.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 02 / 2020

Transaction ID : SA11AI.101351

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

25.00

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

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

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

FOR LINE NUMBER: PAGE 58 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City  
JACKSONVILLE

State  
FL

Zip Code  
32205

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 ▼

687.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 03 / 2020

Transaction ID : SA11Al.101361

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City  
JACKSONVILLE

State  
FL

Zip Code  
32205

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 ▼

697.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 03 / 2020

Transaction ID : SA11Al.101362

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City  
JACKSONVILLE

State  
FL

Zip Code  
32205

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 ▼

702.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 05 / 2020

Transaction ID : SA11Al.101352

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

25.00

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

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

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

FOR LINE NUMBER: PAGE 59 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City  
JACKSONVILLE

State  
FL

Zip Code  
32205

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 ▼

707.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 05 / 2020

Transaction ID : SA11Al.101353

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

B. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City  
JACKSONVILLE

State  
FL

Zip Code  
32205

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 ▼

712.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 11 / 2020

Transaction ID : SA11Al.101354

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City  
JACKSONVILLE

State  
FL

Zip Code  
32205

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 ▼

717.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 11 / 2020

Transaction ID : SA11Al.101355

Amount of Each Receipt this Period

5.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

15.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City  
JACKSONVILLE

State  
FL

Zip Code  
32205

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 ▼

727.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2020

Transaction ID : SA11AI.101363

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City  
JACKSONVILLE

State  
FL

Zip Code  
32205

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 ▼

752.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2020

Transaction ID : SA11AI.101366

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City  
JACKSONVILLE

State  
FL

Zip Code  
32205

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 ▼

757.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 17 / 2020

Transaction ID : SA11AI.101356

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

40.00

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

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City  
JACKSONVILLE

State  
FL

Zip Code  
32205

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 ▼

767.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 17 / 2020

Transaction ID : SA11Al.101364

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City  
JACKSONVILLE

State  
FL

Zip Code  
32205

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 ▼

772.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 27 / 2020

Transaction ID : SA11Al.101357

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City  
JACKSONVILLE

State  
FL

Zip Code  
32205

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 ▼

777.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11Al.101358

Amount of Each Receipt this Period

5.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

20.00

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

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City  
JACKSONVILLE

State  
FL

Zip Code  
32205

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 ▼

787.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.101365

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. DIETTINGER, FRANK, , ,

Mailing Address 1435 WILLOWBROOK DR

City  
WASHINGTON

State  
PA

Zip Code  
15301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 21 / 2020

Transaction ID : SA11AI.101385

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. DISSLY, RICHARD, , ,

Mailing Address 6651 LEYLAND PARK DR

City  
SAN JOSE

State  
CA

Zip Code  
95120

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BLUE PEARL SOFTWARE

Occupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.101448

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

310.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. DISSLY, RICHARD, , ,**

Mailing Address 6651 LEYLAND PARK DR

City  
SAN JOSE

State  
CA

Zip Code  
95120

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BLUE PEARL SOFTWARE

Occupation (for Individual)  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.101449

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. DONNELLY, THOMAS, , ,**

Mailing Address 8846 S SACRAMENTO AVE

City  
EVERGREEN PARK

State  
IL

Zip Code  
60805

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COOK COUNTY OF IL

Occupation (for Individual)  
COMPUTER PROGRAMMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 21 / 2020

Transaction ID : SA11AI.101531

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. DONNELLY, THOMAS, , ,**

Mailing Address 8846 S SACRAMENTO AVE

City  
EVERGREEN PARK

State  
IL

Zip Code  
60805

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COOK COUNTY OF IL

Occupation (for Individual)  
COMPUTER PROGRAMMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 21 / 2020

Transaction ID : SA11AI.101532

Amount of Each Receipt this Period

125.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

275.00

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. DORAZIO, SHARON, , ,**

Mailing Address 143 SHEPHERDS GLEN RD

City  
HEATH

State  
TX

Zip Code  
75032

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 ▼

252.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 23 / 2020

Transaction ID : SA11AI.101540

Amount of Each Receipt this Period

52.40

☐ Memo Item

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

**B. DOUGLAS, JAMES, , ,**

Mailing Address 96 CHATEAU ST MICHEL DR

City  
KENNER

State  
LA

Zip Code  
70065

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.101561

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. DUPONT, REYNOLDS, , ,**

Mailing Address 2735 BRICKYARD RD

City  
FISHERS ISLAND

State  
NY

Zip Code  
06390

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 01 / 2020

Transaction ID : SA11AI.101673

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

552.40



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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. EDWARDS, DOUGLAS, , ,

Mailing Address P.O. BOX 1591

City  
TOPOCKState  
AZZip Code  
86436FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 18 / 2020

Transaction ID : SA11Al.101760

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. EHRlich, CLIFFORD, , ,

Mailing Address 9710 BEMAN WOODS WAY

City  
POTOMACState  
MDZip Code  
20854FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 01 / 2020

Transaction ID : SA11Al.101780

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. EHRlich, CLIFFORD, , ,

Mailing Address 9710 BEMAN WOODS WAY

City  
POTOMACState  
MDZip Code  
20854FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 06 / 2020

Transaction ID : SA11Al.101781

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

750.00

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 66 OF 282  
(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)

**AMERICA FIRST ACTION, INC.**

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

**A. EHRlich, CLIFFORD, , ,**

Mailing Address 9710 BEMAN WOODS WAY

City  
POTOMACState  
MDZip Code  
20854FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		06		2020

Transaction ID : SA11Al.101782

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. ELGIE, BARBARA, , ,**

Mailing Address 4663 LAWLER CT

City  
LA MESAState  
CAZip Code  
91941FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2020

Transaction ID : SA11Al.101804

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. ELGIE, BARBARA, , ,**

Mailing Address 4663 LAWLER CT

City  
LA MESAState  
CAZip Code  
91941FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2020

Transaction ID : SA11Al.101805

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

310.00

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

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City  
FLETCHERState  
OKZip Code  
73541FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CITY OF LAWTONOccupation (for Individual)  
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 05 / 2020

Transaction ID : SA11Al.101813

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

B. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City  
FLETCHERState  
OKZip Code  
73541FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CITY OF LAWTONOccupation (for Individual)  
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1033.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 05 / 2020

Transaction ID : SA11Al.101829

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City  
FLETCHERState  
OKZip Code  
73541FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CITY OF LAWTONOccupation (for Individual)  
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1068.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 06 / 2020

Transaction ID : SA11Al.101825

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

536.00

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

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

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

FOR LINE NUMBER: PAGE 68 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City  
FLETCHERState  
OKZip Code  
73541FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CITY OF LAWTONOccupation (for Individual)  
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1103.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 07 / 2020

Transaction ID : SA11Al.101826

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

B. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City  
FLETCHERState  
OKZip Code  
73541FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CITY OF LAWTONOccupation (for Individual)  
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1128.00

Date of Receipt

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

Transaction ID : SA11Al.101820

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City  
FLETCHERState  
OKZip Code  
73541FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CITY OF LAWTONOccupation (for Individual)  
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1153.00

Date of Receipt

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

Transaction ID : SA11Al.101821

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

85.00

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

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City  
FLETCHERState  
OKZip Code  
73541FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CITY OF LAWTONOccupation (for Individual)  
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1188.00

Date of Receipt

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

Transaction ID : SA11AI.101827

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

B. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City  
FLETCHERState  
OKZip Code  
73541FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CITY OF LAWTONOccupation (for Individual)  
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 14 / 2020

Transaction ID : SA11AI.101817

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City  
FLETCHERState  
OKZip Code  
73541FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CITY OF LAWTONOccupation (for Individual)  
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1213.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2020

Transaction ID : SA11AI.101814

Amount of Each Receipt this Period

5.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

60.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City  
FLETCHERState  
OKZip Code  
73541FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CITY OF LAWTONOccupation (for Individual)  
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1239.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2020

Transaction ID : SA11Al.101824

Amount of Each Receipt this Period

26.35

☐ Memo Item

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

B. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City  
FLETCHERState  
OKZip Code  
73541FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CITY OF LAWTONOccupation (for Individual)  
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1259.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11Al.101818

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City  
FLETCHERState  
OKZip Code  
73541FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CITY OF LAWTONOccupation (for Individual)  
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1294.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 17 / 2020

Transaction ID : SA11Al.101828

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

81.35

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. ELLIS, DAVID, , ,**

Mailing Address 207 E SHIELDS ST

City  
FLETCHER

State  
OK

Zip Code  
73541

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CITY OF LAWTON

Occupation (for Individual)  
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1304.35

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 20 / 2020

Transaction ID : SA11AI.101816

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

**B. ELLIS, DAVID, , ,**

Mailing Address 207 E SHIELDS ST

City  
FLETCHER

State  
OK

Zip Code  
73541

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CITY OF LAWTON

Occupation (for Individual)  
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1329.35

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.101822

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. ELLIS, DAVID, , ,**

Mailing Address 207 E SHIELDS ST

City  
FLETCHER

State  
OK

Zip Code  
73541

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CITY OF LAWTON

Occupation (for Individual)  
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1334.35

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 27 / 2020

Transaction ID : SA11AI.101815

Amount of Each Receipt this Period

5.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

40.00

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City  
FLETCHER

State  
OK

Zip Code  
73541

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CITY OF LAWTON

Occupation (for Individual)  
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1359.35

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2020

Transaction ID : SA11Al.101823

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City  
FLETCHER

State  
OK

Zip Code  
73541

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CITY OF LAWTON

Occupation (for Individual)  
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1379.35

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11Al.101819

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. ENCOMIENDA, PAZ, , ,

Mailing Address P.O. BOX 4776

City  
HINSDALE

State  
IL

Zip Code  
60522

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 ▼

200.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11Al.101851

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

75.00

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



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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ENCOMIENDA, PAZ, , ,

Mailing Address P.O. BOX 4776

City  
HINSDALEState  
ILZip Code  
60522FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.51

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11Al.101849

Amount of Each Receipt this Period

26.35

☐ Memo Item

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

B. ENTERPRISE, DANGENE, , ,

Mailing Address 66 E 55TH ST

City  
NEW YORKState  
NYZip Code  
10022FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DANGENE ENTERPRISEOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 02 / 2020

Transaction ID : SA11Al.101876

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. EWING, PEGGY, , ,

Mailing Address P.O. BOX 2760

City  
MESQUITEState  
NVZip Code  
89024FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

486.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2020

Transaction ID : SA11Al.101949

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

171.35

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. FELDMAN, DOROTHY, J, ,**

Mailing Address 3332 50TH AVE CT E

City  
BRADENTON

State  
FL

Zip Code  
34203

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2020

Transaction ID : SA11AI.102038

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. FERGUSON, PERRY, H, ,**

Mailing Address 1482 EAST VALLEY RD  
STE 200

City  
SANTA BARBARA

State  
CA

Zip Code  
93108

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SBF & L INC.

Occupation (for Individual)  
R. E. PROFESSIONAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2020

Transaction ID : SA11AI.102046

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

**C. FERGUSON, PERRY, H, ,**

Mailing Address 1482 EAST VALLEY RD  
STE 200

City  
SANTA BARBARA

State  
CA

Zip Code  
93108

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SBF & L INC.

Occupation (for Individual)  
R. E. PROFESSIONAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2020

Transaction ID : SA11AI.102047

Amount of Each Receipt this Period

5.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

106.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. FERGUSON, PERRY, H, ,

Mailing Address 1482 EAST VALLEY RD  
STE 200

City  
SANTA BARBARA

State  
CA

Zip Code  
93108

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SBF & L INC.

Occupation (for Individual)  
R. E. PROFESSIONAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2020

Transaction ID : SA11AI.102048

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. FERGUSON, PERRY, H, ,

Mailing Address 1482 EAST VALLEY RD  
STE 200

City  
SANTA BARBARA

State  
CA

Zip Code  
93108

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SBF & L INC.

Occupation (for Individual)  
R. E. PROFESSIONAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2020

Transaction ID : SA11AI.102049

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. FERGUSON, PERRY, H, ,

Mailing Address 1482 EAST VALLEY RD  
STE 200

City  
SANTA BARBARA

State  
CA

Zip Code  
93108

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SBF & L INC.

Occupation (for Individual)  
R. E. PROFESSIONAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

436.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2020

Transaction ID : SA11AI.102050

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

225.00

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

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 76 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. FIDDYMENT, KARYL, LYNN, ,**

Mailing Address 6419 RIO DE ONAR WAY

City  
ELK GROVE

State  
CA

Zip Code  
95757

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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 03 / 2020

Transaction ID : SA11AI.102087

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. FIDDYMENT, KARYL, LYNN, ,**

Mailing Address 6419 RIO DE ONAR WAY

City  
ELK GROVE

State  
CA

Zip Code  
95757

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 ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 08 / 2020

Transaction ID : SA11AI.102085

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

**C. FIDDYMENT, KARYL, LYNN, ,**

Mailing Address 6419 RIO DE ONAR WAY

City  
ELK GROVE

State  
CA

Zip Code  
95757

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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 19 / 2020

Transaction ID : SA11AI.102084

Amount of Each Receipt this Period

30.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

115.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. FIDDYMENT, KARYL, LYNN, ,

Mailing Address 6419 RIO DE ONAR WAY

City  
ELK GROVE

State  
CA

Zip Code  
95757

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 ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.102086

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

B. FIELER, SEAN, , ,

Mailing Address 1540 RIVERBANK RD

City  
STAMFORD

State  
CT

Zip Code  
06903

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MASON HILL ASSET

Occupation (for Individual)  
MONEY MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 20 / 2020

Transaction ID : SA11AI.102094

Amount of Each Receipt this Period

10000.00

☐ Memo Item

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

C. FISCHER, GREGORY, , ,

Mailing Address 1442 SEACOAST DR  
#5

City  
IMPERIAL BEACH

State  
CA

Zip Code  
91932

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 ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2020

Transaction ID : SA11AI.102134

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

10080.00

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

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. FLORES, FRANK, , ,

Mailing Address 11309 HARBOR BREEZE DR.

City  
MONTGOMERYState  
TXZip Code  
77356FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 23 / 2020

Transaction ID : SA11AI.102194

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. FLUTER, RUSSELL, , ,

Mailing Address 2025 W BALBOA BLVD

City  
NEWPORT BEACHState  
CAZip Code  
92663FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.102203

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. FUCHS, ARNOLD, , ,

Mailing Address 14996 S W SUMMERVIEW DR

City  
PORTLANDState  
ORZip Code  
97224FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HARRISOccupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

261.50

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 19 / 2020

Transaction ID : SA11AI.102371

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

235.00

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

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 79 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. FUQUA, JAMES, , ,

Mailing Address 34799 AVE 13 1/2

City  
MADERAState  
CAZip Code  
93636FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 28 / 2020

Transaction ID : SA11AI.102390

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. GADDIS, JANE, , ,

Mailing Address 10700 SIKES PL  
STE 2245City  
CHARLOTTEState  
NCZip Code  
28277FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ASHOK B CHUDGAR CPA PAOccupation (for Individual)  
SR ACCOUNTANT/VP OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 18 / 2020

Transaction ID : SA11AI.102411

Amount of Each Receipt this Period

4.99

☐ Memo Item

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

C. GADDIS, JANE, , ,

Mailing Address 10700 SIKES PL  
STE 2245City  
CHARLOTTEState  
NCZip Code  
28277FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ASHOK B CHUDGAR CPA PAOccupation (for Individual)  
SR ACCOUNTANT/VP OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

381.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 27 / 2020

Transaction ID : SA11AI.102412

Amount of Each Receipt this Period

4.99

☐ Memo Item

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

109.98

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

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. GARCZYNSKI, PATRICIA, , ,

Mailing Address 16547 MARTINCOIT RD

City  
POWAYState  
CAZip Code  
92064FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TONY GARCZYNSKI DEV. INC.Occupation (for Individual)  
GENERAL CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 19 / 2020

Transaction ID : SA11AI.102498

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. GAY, KIM, , ,

Mailing Address 3303 ABERCORN ST

City  
SAVANNAHState  
GAZip Code  
31405FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.72

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 08 / 2020

Transaction ID : SA11AI.102564

Amount of Each Receipt this Period

260.73

☐ Memo Item

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

C. GAY, KIM, , ,

Mailing Address 3303 ABERCORN ST

City  
SAVANNAHState  
GAZip Code  
31405FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

527.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 08 / 2020

Transaction ID : SA11AI.102565

Amount of Each Receipt this Period

260.73

☐ Memo Item

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

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

621.46



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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. GIANNE, ALDO, , ,**

Mailing Address 7969 NW 2ND ST

City  
MIAMI

State  
FL

Zip Code  
33156

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 19 / 2020

Transaction ID : SA11Al.102623

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

**B. GIANNE, ALDO, , ,**

Mailing Address 7969 NW 2ND ST

City  
MIAMI

State  
FL

Zip Code  
33156

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 ▼

308.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11Al.102621

Amount of Each Receipt this Period

8.99

☐ Memo Item

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

**C. GIANNE, ALDO, , ,**

Mailing Address 7969 NW 2ND ST

City  
MIAMI

State  
FL

Zip Code  
33156

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 ▼

333.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11Al.102622

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

63.99

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. GIANNE, ALDO, , ,**

Mailing Address 7969 NW 2ND ST

City  
MIAMI

State  
FL

Zip Code  
33156

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 ▼

363.99

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.102624

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

**B. GILLILAND, DANIEL, , ,**

Mailing Address 7428 S QUAIL CIR  
#1713

City  
LITTLETON

State  
CO

Zip Code  
80127

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 03 / 2020

Transaction ID : SA11AI.102689

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. GILLILAND, DANIEL, , ,**

Mailing Address 7428 S QUAIL CIR  
#1713

City  
LITTLETON

State  
CO

Zip Code  
80127

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 ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 03 / 2020

Transaction ID : SA11AI.102690

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

230.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. GILMORE, JEFFREY, , ,**

Mailing Address 665 PINE ST  
#701

City  
SAN FRANCISCO

State  
CA

Zip Code  
94108

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ABLE ENGINEERING SERVICES

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 08 / 2020

Transaction ID : SA11AI.102699

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. GLOCKLER, HERRMANN, , ,**

Mailing Address 3265 SIERRA CREST WAY

City  
RENO

State  
NV

Zip Code  
89519

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.102733

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. GOLDBERG, SHERRY, , ,**

Mailing Address 8317 N RIDGEVIEW DR

City  
PARADISE VALLEY

State  
AZ

Zip Code  
85253

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
ADVERTISING AND ART

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 05 / 2020

Transaction ID : SA11AI.102754

Amount of Each Receipt this Period

10.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

210.00

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. GOLDBERG, SHERRY, , ,

Mailing Address 8317 N RIDGEVIEW DR

City

PARADISE VALLEY

State

AZ

Zip Code

85253

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED

Occupation (for Individual)

ADVERTISING AND ART

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 09 / 2020

Transaction ID : SA11AI.102758

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. GOLDBERG, SHERRY, , ,

Mailing Address 8317 N RIDGEVIEW DR

City

PARADISE VALLEY

State

AZ

Zip Code

85253

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED

Occupation (for Individual)

ADVERTISING AND ART

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.102757

Amount of Each Receipt this Period

10.73

☐ Memo Item

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

C. GOLDBERG, SHERRY, , ,

Mailing Address 8317 N RIDGEVIEW DR

City

PARADISE VALLEY

State

AZ

Zip Code

85253

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED

Occupation (for Individual)

ADVERTISING AND ART

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

315.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 19 / 2020

Transaction ID : SA11AI.102755

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

45.73

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. GOLDBERG, SHERRY, , ,

Mailing Address 8317 N RIDGEVIEW DR

City  
PARADISE VALLEY

State  
AZ

Zip Code  
85253

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
ADVERTISING AND ART

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 23 / 2020

Transaction ID : SA11AI.102756

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. GONZALO, NELSON, , ,

Mailing Address 2811 SE 5TH CT

City  
CAPE CORAL

State  
FL

Zip Code  
33904

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ANGE'S AUTO

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 14 / 2020

Transaction ID : SA11AI.102804

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. GONZALO, NELSON, , ,

Mailing Address 2811 SE 5TH CT

City  
CAPE CORAL

State  
FL

Zip Code  
33904

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ANGE'S AUTO

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

257.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 20 / 2020

Transaction ID : SA11AI.102809

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

85.00

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

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

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

FOR LINE NUMBER: PAGE 86 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. GONZALO, NELSON, , ,**

Mailing Address 2811 SE 5TH CT

City  
CAPE CORAL

State  
FL

Zip Code  
33904

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ANGE'S AUTO

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 24 / 2020

Transaction ID : SA11AI.102799

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

**B. GONZALO, NELSON, , ,**

Mailing Address 2811 SE 5TH CT

City  
CAPE CORAL

State  
FL

Zip Code  
33904

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ANGE'S AUTO

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 24 / 2020

Transaction ID : SA11AI.102805

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. GONZALO, NELSON, , ,**

Mailing Address 2811 SE 5TH CT

City  
CAPE CORAL

State  
FL

Zip Code  
33904

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ANGE'S AUTO

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

310.34

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 24 / 2020

Transaction ID : SA11AI.102806

Amount of Each Receipt this Period

26.35

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

52.35

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

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

FOR LINE NUMBER: PAGE 87 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. GOULD, DOUGLAS, , ,**

Mailing Address 2625 MAROON BELLS AVE  
#16

City  
COLORADO SPRINGS

State  
CO

Zip Code  
80918

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 ▼

221.99

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 23 / 2020

Transaction ID : SA11Al.102878

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. GOULD, DOUGLAS, , ,**

Mailing Address 2625 MAROON BELLS AVE  
#16

City  
COLORADO SPRINGS

State  
CO

Zip Code  
80918

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 ▼

248.34

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 23 / 2020

Transaction ID : SA11Al.102879

Amount of Each Receipt this Period

26.35

☐ Memo Item

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

**C. GOULD, DOUGLAS, , ,**

Mailing Address 2625 MAROON BELLS AVE  
#16

City  
COLORADO SPRINGS

State  
CO

Zip Code  
80918

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 ▼

274.69

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 23 / 2020

Transaction ID : SA11Al.102880

Amount of Each Receipt this Period

26.35

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

77.70

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

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

FOR LINE NUMBER: PAGE 88 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. GOULD, DOUGLAS, , ,

Mailing Address 2625 MAROON BELLS AVE  
#16

City  
COLORADO SPRINGS

State  
CO

Zip Code  
80918

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 ▼

309.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 23 / 2020

Transaction ID : SA11AI.102883

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

B. GOULD, DOUGLAS, , ,

Mailing Address 2625 MAROON BELLS AVE  
#16

City  
COLORADO SPRINGS

State  
CO

Zip Code  
80918

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 ▼

344.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 23 / 2020

Transaction ID : SA11AI.102884

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

C. GRAHAM, WILLIAM, , ,

Mailing Address 1367 PHEASANT LN

City  
WINSTON SALEM

State  
NC

Zip Code  
27106

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 21 / 2020

Transaction ID : SA11AI.102902

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

320.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. GRAHAM, WILLIAM, , ,**

Mailing Address 1367 PHEASANT LN

City  
WINSTON SALEM

State  
NC

Zip Code  
27106

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 21 / 2020

Transaction ID : SA11AI.102903

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. GRIFFIN, THOMAS, , ,**

Mailing Address 117 COUNTY ROAD 661

City  
ABILENE

State  
TX

Zip Code  
79606

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.102985

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. GRUNDHOFER, JERRY, , ,**

Mailing Address 1776 PARK AVE  
4-131

City  
PARK CITY

State  
UT

Zip Code  
84060

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

M M / D D / Y Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.103051

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

2350.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 90 OF 282

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. GUERRERO, LARRY, , ,**

Mailing Address 4158 LEPIRE DR

City  
CARSON CITYState  
NVZip Code  
89701FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2020

Transaction ID : SA11AI.103072

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. HAAS, GLEN, , ,**

Mailing Address 880 OPEN SKY CT

City  
ALLENState  
TXZip Code  
75013FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ARAGIO SOLUTIONSOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2020

Transaction ID : SA11AI.103122

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. HAGEMAN, DEAN, , ,**

Mailing Address P.O. BOX 173

City  
HERONState  
MTZip Code  
59844FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2020

Transaction ID : SA11AI.103151

Amount of Each Receipt this Period

104.48

☐ Memo Item

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

254.48

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 OF 282

(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)

**AMERICA FIRST ACTION, INC.**

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

**A. HAGEMAN, DEAN, , ,**

Mailing Address P.O. BOX 173

City  
HERONState  
MTZip Code  
59844FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2020

Transaction ID : SA11AI.103152

Amount of Each Receipt this Period

104.48

☐ Memo Item

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

**B. HALE, SARAH, , ,**

Mailing Address 103 WASHINGTON ST

City  
XENIAState  
OHZip Code  
45385FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	13	/	2020

Transaction ID : SA11AI.103187

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. HAMILTON, EARL, , ,**Mailing Address 105 WINTER FOREST DR  
APT 102City  
CANDLERState  
NCZip Code  
28715FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	28	/	2020

Transaction ID : SA11AI.103225

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

304.48

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

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

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

FOR LINE NUMBER: PAGE 92 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. HAMILTON, EARL, , ,**

Mailing Address 105 WINTER FOREST DR  
APT 102

City  
CANDLER

State  
NC

Zip Code  
28715

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 ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.103226

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. HAMMOND, PHILIP, , ,**

Mailing Address 2440 BORDER LINKS DR

City  
VISALIA

State  
CA

Zip Code  
93291

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 / D D / Y Y Y Y Y Y  
04 / 05 / 2020

Transaction ID : SA11AI.103234

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**C. HANDLEY, BILL, , ,**

Mailing Address 101 HEATHER ST

City  
WARNER ROBINS

State  
GA

Zip Code  
31093

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 ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 23 / 2020

Transaction ID : SA11AI.103247

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1600.00

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

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

FOR LINE NUMBER: PAGE 93 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. HARANG, GORDON, , ,**

Mailing Address 1517 SAWMILL CREEK RD

City  
SITKA

State  
AK

Zip Code  
99835

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ARROWHEAD TRANS. INC.

Occupation (for Individual)  
CORP. OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 19 / 2020

Transaction ID : SA11AI.103275

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. HARDAWAY, DEBRA, , ,**

Mailing Address 139 SADDLEHORN DR

City

WARNER ROBINS

State  
GA

Zip Code  
31088

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 20 / 2020

Transaction ID : SA11AI.103276

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**C. HARRIS, DONNA, , ,**

Mailing Address 1961 GARDENA PL

City

SAN DIEGO

State  
CA

Zip Code  
92110

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 18 / 2020

Transaction ID : SA11AI.103338

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

250.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. HARRIS, RYAN, , ,**

Mailing Address P.O. BOX 02-5635

CRC 128

City  
MIAMI

State  
FL

Zip Code  
33102

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
OFFICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11AI.103349

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. HAU, ADA, , ,**

Mailing Address 1901 QUAIL MEADOW RD

City

LOS ALTOS

State

CA

Zip Code

94024

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 ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 17 / 2020

Transaction ID : SA11AI.103410

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. HAU, ADA, , ,**

Mailing Address 1901 QUAIL MEADOW RD

City

LOS ALTOS

State

CA

Zip Code

94024

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 ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 21 / 2020

Transaction ID : SA11AI.103411

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

300.00

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

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. HAVERLY, VICTOR, , ,**

Mailing Address 307 ALISO ST

City  
VENTURA

State  
CA

Zip Code  
93001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HAVERLY SYSTEMS INC

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.103425

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**B. HAWKINS, GREGG, , ,**

Mailing Address 113 SHADOW LAKE DRIVE

City  
BUCKHEAD

State  
GA

Zip Code  
30625

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE SILVER MOON

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 14 / 2020

Transaction ID : SA11AI.103433

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. HAWORTH, RONALD, , ,**

Mailing Address P.O. BOX 8435

City  
HOBE SOUND

State  
FL

Zip Code  
33475

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.103436

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

650.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HAYS, THOMAS, , ,

Mailing Address 10008 POLO TRAIL AVE

City

BAKERSFIELD

State

CA

Zip Code

93312

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.103461

Amount of Each Receipt this Period

100.00

☐

Memo Item

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

B. HEIRMAN, DONALD, , ,

Mailing Address 143 JUMPING BROOK RD

City

LINCROFT

State

NJ

Zip Code

07738

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 17 / 2020

Transaction ID : SA11AI.103502

Amount of Each Receipt this Period

100.00

☐

Memo Item

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

C. HEIRMAN, DONALD, , ,

Mailing Address 143 JUMPING BROOK RD

City

LINCROFT

State

NJ

Zip Code

07738

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify)

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2020

Transaction ID : SA11AI.103501

Amount of Each Receipt this Period

50.00

☐

Memo Item

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

250.00

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



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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. HENDRIX, PENNY, , ,**

Mailing Address 7417 WILLOWBROOK RD

City  
FAIRFAX STATION

State  
VA

Zip Code  
22039

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 17 / 2020

Transaction ID : SA11AI.103556

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**B. HICKS, JOANN, , ,**

Mailing Address 4115 GUARDIAN ST

City  
SIMI VALLEY

State  
CA

Zip Code  
93063

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
LOGISTICS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.65

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11AI.103665

Amount of Each Receipt this Period

208.65

☐ Memo Item

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

**C. HILLEGASS, RANDY, , ,**

Mailing Address 3786 ALLEGHENY RD

City  
MANNS CHOICE

State  
PA

Zip Code  
15550

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PENNDOT

Occupation (for Individual)  
CIVIL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.103705

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1458.65

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

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. HILLEGASS, RANDY, , ,**

Mailing Address 3786 ALLEGHENY RD

City  
MANNS CHOICE

State  
PA

Zip Code  
15550

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PENNDOT

Occupation (for Individual)  
CIVIL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.103706

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. HINDS, CAROL, , ,**

Mailing Address 5113 PRONGHORN AVE

City  
ELIZABETH

State  
CO

Zip Code  
80107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.103715

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. HITCHCOCK, JAMES, , ,**

Mailing Address 4642 RIDGEWOOD CT

City  
MORADA

State  
CA

Zip Code  
95212

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 ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.103726

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

600.00

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

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. HOANG, MUU, , ,**

Mailing Address 127 PEARLGRASS CT

City  
SAN RAMON

State  
CA

Zip Code  
94582

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 20 / 2020

Transaction ID : SA11AI.103739

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. HODGE, CHRIS, , ,**

Mailing Address 2180 IDLEWILD RD

City  
PALM BEACH GARDENS

State  
FL

Zip Code  
33410-2598

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE WAYS BOATYARD LLC

Occupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 07 / 2020

Transaction ID : SA11AI.103748

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

**C. HOLINKA, JOSEPH, , ,**

Mailing Address 14411 SHELTER LN

City  
HAYMARKET

State  
VA

Zip Code  
20169

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 05 / 2020

Transaction ID : SA11AI.103785

Amount of Each Receipt this Period

150.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

475.00

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HUBBARD, FRANK, , ,

Mailing Address 1610 BENT OAK LN

 City  
 VERO BEACH

 State  
 FL

 Zip Code  
 32963

 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 ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2020

Transaction ID : SA11AI.103919

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. HUDSON, WILLIAM, , ,

Mailing Address 28 HUDSON LN

 City  
 ALAMO

 State  
 TN

 Zip Code  
 38001

 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 ▼

782.00

Date of Receipt

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

Transaction ID : SA11AI.103934

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

C. HUDSON, WILLIAM, , ,

Mailing Address 28 HUDSON LN

 City  
 ALAMO

 State  
 TN

 Zip Code  
 38001

 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 ▼

807.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	09	/	2020

Transaction ID : SA11AI.103931

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

170.00

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

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HUDSON, WILLIAM, , ,

Mailing Address 28 HUDSON LN

City  
ALAMOState  
TNZip Code  
38001FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.00

Date of Receipt

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

Transaction ID : SA11Al.103932

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. HUDSON, WILLIAM, , ,

Mailing Address 28 HUDSON LN

City  
ALAMOState  
TNZip Code  
38001FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

852.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11Al.103930

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. HUDSON, WILLIAM, , ,

Mailing Address 28 HUDSON LN

City  
ALAMOState  
TNZip Code  
38001FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

882.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11Al.103933

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

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

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HUFFMAN, JOHN, G, ,

Mailing Address 302 PRESQUE ISLE BLVD  
UNIT 101

City  
ERIE

State  
PA

Zip Code  
16505

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 ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 06 / 2020

Transaction ID : SA11Al.103956

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. HUFFMAN, JOHN, G, ,

Mailing Address 302 PRESQUE ISLE BLVD  
UNIT 101

City  
ERIE

State  
PA

Zip Code  
16505

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 ▼

326.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 06 / 2020

Transaction ID : SA11Al.103957

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. HUFFMAN, JOHN, G, ,

Mailing Address 302 PRESQUE ISLE BLVD  
UNIT 101

City  
ERIE

State  
PA

Zip Code  
16505

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 ▼

426.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 07 / 2020

Transaction ID : SA11Al.103958

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

300.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. HUFFMAN, JOHN, G, ,**

Mailing Address 302 PRESQUE ISLE BLVD  
UNIT 101

City  
ERIE

State  
PA

Zip Code  
16505

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 ▼

526.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 07 / 2020

Transaction ID : SA11AI.103959

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. HUFFMAN, JOHN, G, ,**

Mailing Address 302 PRESQUE ISLE BLVD  
UNIT 101

City  
ERIE

State  
PA

Zip Code  
16505

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 ▼

626.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 07 / 2020

Transaction ID : SA11AI.103960

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. HUFFMAN, JOHN, G, ,**

Mailing Address 302 PRESQUE ISLE BLVD  
UNIT 101

City  
ERIE

State  
PA

Zip Code  
16505

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 ▼

726.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 07 / 2020

Transaction ID : SA11AI.103961

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

300.00

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

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

FOR LINE NUMBER: PAGE 104 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. HUFFMAN, JOHN, G, ,**

Mailing Address 302 PRESQUE ISLE BLVD  
UNIT 101

City  
ERIE

State  
PA

Zip Code  
16505

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 ▼

731.00

Date of Receipt

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

Transaction ID : SA11AI.103952

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

**B. HUFFMAN, JOHN, G, ,**

Mailing Address 302 PRESQUE ISLE BLVD  
UNIT 101

City  
ERIE

State  
PA

Zip Code  
16505

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 ▼

981.00

Date of Receipt

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

Transaction ID : SA11AI.103963

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. HUFFMAN, JOHN, G, ,**

Mailing Address 302 PRESQUE ISLE BLVD  
UNIT 101

City  
ERIE

State  
PA

Zip Code  
16505

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 ▼

1081.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.103962

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

355.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. HUFFMAN, JOHN, G, ,**Mailing Address 302 PRESQUE ISLE BLVD  
UNIT 101City  
ERIEState  
PAZip Code  
16505FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		18		2020

Transaction ID : SA11AI.103954

Amount of Each Receipt this Period

26.35

☐ Memo Item

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

**B. HUFFMAN, JOHN, G, ,**Mailing Address 302 PRESQUE ISLE BLVD  
UNIT 101City  
ERIEState  
PAZip Code  
16505FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1127.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2020

Transaction ID : SA11AI.103953

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

**C. HULEN, CYNTHIA, , ,**

Mailing Address 3467 ADARE CIR

City  
WESTFIELDState  
INZip Code  
46062FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ESSENTIAL SIGNSOccupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		16		2020

Transaction ID : SA11AI.103997

Amount of Each Receipt this Period

104.48

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

150.83

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

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

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

FOR LINE NUMBER: PAGE 106 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HULLINGER, JENNIFER, , ,

Mailing Address 615 WARNE RD

City  
MICHIGAN CITY

State  
IN

Zip Code  
46360

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.104002

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. HUNDEMER, CONSTANCE, , ,

Mailing Address 6129 SUNLIGHT MOUNTAIN RD

City  
SPOTSYLVANIA COURTHOUSE

State  
VA

Zip Code  
22553

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 ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 18 / 2020

Transaction ID : SA11AI.104014

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. IGNASIAK, KATHERINE, , ,

Mailing Address 17595 CALLEN AVE

City  
KENT CITY

State  
MI

Zip Code  
49330

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ORCHARD HILL MECHANICAL

Occupation (for Individual)  
OFFICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 01 / 2020

Transaction ID : SA11AI.104071

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

400.00

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

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

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

FOR LINE NUMBER: PAGE 107 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. JOBE, RENEE, , ,

Mailing Address 8185 E ALAMEDA RD

City  
SCOTTSDALE

State  
AZ

Zip Code  
85255

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

M M / D D / Y Y Y Y Y Y  
04 / 21 / 2020

Transaction ID : SA11Al.104246

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. JOHNSON, SHEILA, B, ,

Mailing Address 4636 HARLEY AVE

City  
FORT WORTH

State  
TX

Zip Code  
76107

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 ▼

567.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 01 / 2020

Transaction ID : SA11Al.104329

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. JOHNSON, SUSAN, , ,

Mailing Address 14343 HARBOUR LINKS CT  
UNIT 22B

City  
FORT MYERS

State  
FL

Zip Code  
33908

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 ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 18 / 2020

Transaction ID : SA11Al.104334

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

700.00

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

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

FOR LINE NUMBER: PAGE 108 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. JOHNSON, TAMARA, , ,

Mailing Address 2234 E 900 S  
 #24

City  
 SAINT GEORGE

State  
 UT

Zip Code  
 84790

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2020

Transaction ID : SA11AI.104335

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. JONES, BARRY, , ,

Mailing Address 3800 CLOVERDALE DR

City  
 TYLER

State  
 TX

Zip Code  
 75701

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 ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 05 / 2020

Transaction ID : SA11AI.104363

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. JONES, BRENT, , ,

Mailing Address P.O. BOX 422

City  
 CANBY

State  
 OR

Zip Code  
 97070

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 27 / 2020

Transaction ID : SA11AI.104365

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

400.00

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. JONES, LINDA, , ,**

Mailing Address 3151 KINGSTREE CT

City  
DUBLINState  
OHZip Code  
43017FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2020

Transaction ID : SA11AI.104383

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. JUSTUS, JARVISJI, GUY, , ,**

Mailing Address 4311 PLEASANT ST

City

LA VERNE

State

CA

Zip Code

91750

FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2020

Transaction ID : SA11AI.104455

Amount of Each Receipt this Period

2800.00

☐ Memo Item

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

**C. KEHRT, MARGARET, , , ,**

Mailing Address 38 STONEWOOD CREEK CT

City

DALLAS

State

GA

Zip Code

30132

FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	02	/	2020

Transaction ID : SA11AI.104536

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

2925.00

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 110 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. KEHRT, MARGARET, , ,

Mailing Address 38 STONEWOOD CREEK CT

City  
DALLASState  
GAZip Code  
30132FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 08 / 2020

Transaction ID : SA11Al.104537

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. KEHRT, MARGARET, , ,

Mailing Address 38 STONEWOOD CREEK CT

City  
DALLASState  
GAZip Code  
30132FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 13 / 2020

Transaction ID : SA11Al.104538

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. KEHRT, MARGARET, , ,

Mailing Address 38 STONEWOOD CREEK CT

City  
DALLASState  
GAZip Code  
30132FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

445.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 22 / 2020

Transaction ID : SA11Al.104534

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

60.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. KEHRT, MARGARET, , ,**

Mailing Address 38 STONEWOOD CREEK CT

City  
DALLAS

State  
GA

Zip Code  
30132

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 ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11AI.104535

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

**B. KEHRT, MARGARET, , ,**

Mailing Address 38 STONEWOOD CREEK CT

City  
DALLAS

State  
GA

Zip Code  
30132

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 ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11AI.104539

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

**C. KENDRICK, HUGH, , ,**

Mailing Address 11342 MAINSAIL LN

City  
ANACORTES

State  
WA

Zip Code  
98221

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.104599

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

545.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. KIRBY, JAMES, , ,**

Mailing Address 501 NW SHAMROCK AVE W  
#4013

City  
LEES SUMMIT

State  
MO

Zip Code  
64081

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 / D D / Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.104703

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**B. KLEIN, MICHAEL, , ,**

Mailing Address 5220 KLEES MILL RD

City  
SYKESVILLE

State  
MD

Zip Code  
21784

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHARLES A. KLEIN & SONS INC.

Occupation (for Individual)  
MECHANICAL CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1056.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 07 / 2020

Transaction ID : SA11AI.104738

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**C. KLEIN, MICHAEL, , ,**

Mailing Address 5220 KLEES MILL RD

City  
SYKESVILLE

State  
MD

Zip Code  
21784

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHARLES A. KLEIN & SONS INC.

Occupation (for Individual)  
MECHANICAL CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1556.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 07 / 2020

Transaction ID : SA11AI.104739

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

2000.00



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

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. KLEIN, MICHAEL, , ,

Mailing Address 2301 SHEPHERD COURT

City

JARRETTSVILLE

State

MD

Zip Code

21084

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SOUND PHYSICIANS

Occupation (for Individual)

PHYSICIANS

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11Al.104740

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. KOFINAS, GEORGE, , ,

Mailing Address 100 WINSTON DR  
APT PH-HN

City

CLIFFSIDE PARK

State

NJ

Zip Code

07010

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED

Occupation (for Individual)

PHYSICIAN

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 13 / 2020

Transaction ID : SA11Al.104806

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

C. KORNEGAY, GLEN, , ,

Mailing Address 290 CEDAR RIDGE DRIVE

City

MURPHY

State

NC

Zip Code

28906

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

379.97

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 01 / 2020

Transaction ID : SA11Al.104835

Amount of Each Receipt this Period

4.99

☐ Memo Item

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

654.99

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

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. KORNEGAY, GLEN, , ,**

Mailing Address 290 CEDAR RIDGE DRIVE

City  
MURPHY

State  
NC

Zip Code  
28906

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 ▼

384.97

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 17 / 2020

Transaction ID : SA11Al.104836

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

**B. KORNEGAY, GLEN, , ,**

Mailing Address 290 CEDAR RIDGE DRIVE

City  
MURPHY

State  
NC

Zip Code  
28906

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 ▼

389.97

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 17 / 2020

Transaction ID : SA11Al.104837

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

**C. KORNEGAY, GLEN, , ,**

Mailing Address 290 CEDAR RIDGE DRIVE

City  
MURPHY

State  
NC

Zip Code  
28906

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 ▼

394.97

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 17 / 2020

Transaction ID : SA11Al.104838

Amount of Each Receipt this Period

5.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

15.00

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. KORNEGAY, GLEN, , ,**

Mailing Address 290 CEDAR RIDGE DRIVE

City  
MURPHY

State  
NC

Zip Code  
28906

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 ▼

429.97

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 17 / 2020

Transaction ID : SA11AI.104846

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

**B. KORNEGAY, GLEN, , ,**

Mailing Address 290 CEDAR RIDGE DRIVE

City  
MURPHY

State  
NC

Zip Code  
28906

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 ▼

454.97

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 19 / 2020

Transaction ID : SA11AI.104840

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. KORNEGAY, GLEN, , ,**

Mailing Address 290 CEDAR RIDGE DRIVE

City  
MURPHY

State  
NC

Zip Code  
28906

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 ▼

479.97

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 19 / 2020

Transaction ID : SA11AI.104841

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

85.00

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. KORNEGAY, GLEN, , ,**

Mailing Address 290 CEDAR RIDGE DRIVE

City  
MURPHY

State  
NC

Zip Code  
28906

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 ▼

504.97

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11AI.104842

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. KORNEGAY, GLEN, , ,**

Mailing Address 290 CEDAR RIDGE DRIVE

City  
MURPHY

State  
NC

Zip Code  
28906

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 ▼

509.97

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.104839

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

**C. KORNEGAY, GLEN, , ,**

Mailing Address 290 CEDAR RIDGE DRIVE

City  
MURPHY

State  
NC

Zip Code  
28906

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 ▼

534.97

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.104843

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

55.00

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. KORNEGAY, GLEN, , ,

Mailing Address 290 CEDAR RIDGE DRIVE

City  
MURPHYState  
NCZip Code  
28906FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

559.97

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11Al.104844

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. KORNEGAY, GLEN, , ,

Mailing Address 290 CEDAR RIDGE DRIVE

City  
MURPHYState  
NCZip Code  
28906FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

584.97

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 27 / 2020

Transaction ID : SA11Al.104845

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. KRISTEDJA, PAUL, , ,

Mailing Address 12142 AFTON LN

City  
NORTH TUSTINState  
CAZip Code  
92705FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KPRSOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11Al.104889

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

150.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. KRUSE, RALPH, , ,**

Mailing Address 812 OREGON WAY

City  
WOODBURN

State  
OR

Zip Code  
97071

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 20 / 2020

Transaction ID : SA11AI.104898

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. KULLIJIAN, JOHN, , ,**

Mailing Address 5803 BRIDLEWOOD DR

City  
RICHMOND

State  
TX

Zip Code  
77469

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 ▼

1205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 01 / 2020

Transaction ID : SA11AI.104908

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

**C. KULLIJIAN, JOHN, , ,**

Mailing Address 5803 BRIDLEWOOD DR

City  
RICHMOND

State  
TX

Zip Code  
77469

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 ▼

1215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 01 / 2020

Transaction ID : SA11AI.104909

Amount of Each Receipt this Period

10.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

120.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City  
RICHMOND

State  
TX

Zip Code  
77469

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 ▼

1225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 11 / 2020

Transaction ID : SA11AI.104910

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. KUMARAN, SAM, K, CAPT,

Mailing Address 7907 S GESSNER RD

City  
HOUSTON

State  
TX

Zip Code  
77036

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 ▼

202.68

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2020

Transaction ID : SA11AI.104972

Amount of Each Receipt this Period

10.73

☐ Memo Item

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

C. KUMARAN, SAM, K, CAPT,

Mailing Address 7907 S GESSNER RD

City  
HOUSTON

State  
TX

Zip Code  
77036

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 ▼

213.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2020

Transaction ID : SA11AI.104973

Amount of Each Receipt this Period

10.73

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

31.46

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. KUMARAN, SAM, K, CAPT,**

Mailing Address 7907 S GESSNER RD

City  
HOUSTONState  
TXZip Code  
77036FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		15		2020

Transaction ID : SA11AI.104974

Amount of Each Receipt this Period

10.73

☐ Memo Item

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

**B. KUMARAN, SAM, K, CAPT,**

Mailing Address 7907 S GESSNER RD

City  
HOUSTONState  
TXZip Code  
77036FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		16		2020

Transaction ID : SA11AI.104916

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

**C. KUMARAN, SAM, K, CAPT,**

Mailing Address 7907 S GESSNER RD

City  
HOUSTONState  
TXZip Code  
77036FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

226.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		16		2020

Transaction ID : SA11AI.104917

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

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

12.73



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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

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

**A. KUMARAN, SAM, K, CAPT,**

Mailing Address 7907 S GESSNER RD

City  
HOUSTON

State  
TX

Zip Code  
77036

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 ▼

231.13

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.104923

Amount of Each Receipt this Period

4.99

☐ Memo Item

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

**B. KUMARAN, SAM, K, CAPT,**

Mailing Address 7907 S GESSNER RD

City  
HOUSTON

State  
TX

Zip Code  
77036

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 ▼

236.12

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.104924

Amount of Each Receipt this Period

4.99

☐ Memo Item

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

**C. KUMARAN, SAM, K, CAPT,**

Mailing Address 7907 S GESSNER RD

City  
HOUSTON

State  
TX

Zip Code  
77036

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 ▼

241.11

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.104925

Amount of Each Receipt this Period

4.99

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

14.97

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

**A. KUMARAN, SAM, K, CAPT,**

Mailing Address 7907 S GESSNER RD

City  
HOUSTON

State  
TX

Zip Code  
77036

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 ▼

246.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.104943

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

**B. KUMARAN, SAM, K, CAPT,**

Mailing Address 7907 S GESSNER RD

City  
HOUSTON

State  
TX

Zip Code  
77036

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 ▼

251.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.104944

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

**C. KUMARAN, SAM, K, CAPT,**

Mailing Address 7907 S GESSNER RD

City  
HOUSTON

State  
TX

Zip Code  
77036

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 ▼

256.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.104945

Amount of Each Receipt this Period

5.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

15.00

# **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)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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State  
TX

Zip Code  
77036

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 ▼

261.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.104946

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

**B. KUMARAN, SAM, K, CAPT,**

Mailing Address 7907 S GESSNER RD

City  
HOUSTON

State  
TX

Zip Code  
77036

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 ▼

266.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.104947

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

**C. KUMARAN, SAM, K, CAPT,**

Mailing Address 7907 S GESSNER RD

City  
HOUSTON

State  
TX

Zip Code  
77036

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 ▼

271.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.104948

Amount of Each Receipt this Period

5.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

15.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

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(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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A. KUMARAN, SAM, K, CAPT,

Mailing Address 7907 S GESSNER RD

City  
HOUSTONState  
TXZip Code  
77036FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		16		2020

Transaction ID : SA11AI.104953

Amount of Each Receipt this Period

8.99

☐ Memo Item

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

B. KUMARAN, SAM, K, CAPT,

Mailing Address 7907 S GESSNER RD

City  
HOUSTONState  
TXZip Code  
77036FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.09

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		16		2020

Transaction ID : SA11AI.104954

Amount of Each Receipt this Period

8.99

☐ Memo Item

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

C. KUMARAN, SAM, K, CAPT,

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City  
HOUSTONState  
TXZip Code  
77036FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

298.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		16		2020

Transaction ID : SA11AI.104963

Amount of Each Receipt this Period

9.69

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

27.67

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Mailing Address 7907 S GESSNER RD

City  
HOUSTONState  
TXZip Code  
77036FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.47

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.104964

Amount of Each Receipt this Period

9.69

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KUMARAN, SAM, K, CAPT,

Mailing Address 7907 S GESSNER RD

City  
HOUSTONState  
TXZip Code  
77036FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.47

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.104965

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KUMARAN, SAM, K, CAPT,

Mailing Address 7907 S GESSNER RD

City  
HOUSTONState  
TXZip Code  
77036FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

328.47

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.104966

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

29.69

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 126 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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Mailing Address 7907 S GESSNER RD

City  
HOUSTON

State  
TX

Zip Code  
77036

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 ▼

338.47

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.104967

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KUMARAN, SAM, K, CAPT,**

Mailing Address 7907 S GESSNER RD

City  
HOUSTON

State  
TX

Zip Code  
77036

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 ▼

348.47

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.104968

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KUMARAN, SAM, K, CAPT,**

Mailing Address 7907 S GESSNER RD

City  
HOUSTON

State  
TX

Zip Code  
77036

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 ▼

353.46

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 18 / 2020

Transaction ID : SA11AI.104926

Amount of Each Receipt this Period

4.99

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

24.99

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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HOUSTON

State  
TX

Zip Code  
77036

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 ▼

358.45

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 18 / 2020

Transaction ID : SA11AI.104927

Amount of Each Receipt this Period

4.99

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KUMARAN, SAM, K, CAPT,**

Mailing Address 7907 S GESSNER RD

City  
HOUSTON

State  
TX

Zip Code  
77036

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 ▼

363.97

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 18 / 2020

Transaction ID : SA11AI.104949

Amount of Each Receipt this Period

5.52

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KUMARAN, SAM, K, CAPT,**

Mailing Address 7907 S GESSNER RD

City  
HOUSTON

State  
TX

Zip Code  
77036

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 ▼

369.49

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 18 / 2020

Transaction ID : SA11AI.104950

Amount of Each Receipt this Period

5.52

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

16.03

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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A. KUMARAN, SAM, K, CAPT,

Mailing Address 7907 S GESSNER RD

City  
HOUSTONState  
TXZip Code  
77036FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.01

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 18 / 2020

Transaction ID : SA11Al.104951

Amount of Each Receipt this Period

5.52

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KUMARAN, SAM, K, CAPT,

Mailing Address 7907 S GESSNER RD

City  
HOUSTONState  
TXZip Code  
77036FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 18 / 2020

Transaction ID : SA11Al.104970

Amount of Each Receipt this Period

10.72

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KUMARAN, SAM, K, CAPT,

Mailing Address 7907 S GESSNER RD

City  
HOUSTONState  
TXZip Code  
77036FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

396.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 18 / 2020

Transaction ID : SA11Al.104971

Amount of Each Receipt this Period

10.72

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

26.96

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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State  
TX

Zip Code  
77036

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 ▼

401.44

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 19 / 2020

Transaction ID : SA11AI.104928

Amount of Each Receipt this Period

4.99

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KUMARAN, SAM, K, CAPT,**

Mailing Address 7907 S GESSNER RD

City  
HOUSTON

State  
TX

Zip Code  
77036

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 ▼

406.43

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 20 / 2020

Transaction ID : SA11AI.104929

Amount of Each Receipt this Period

4.99

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KUMARAN, SAM, K, CAPT,**

Mailing Address 7907 S GESSNER RD

City  
HOUSTON

State  
TX

Zip Code  
77036

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 ▼

411.42

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 22 / 2020

Transaction ID : SA11AI.104930

Amount of Each Receipt this Period

4.99

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

14.97

# 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)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A. KUMARAN, SAM, K, CAPT,

Mailing Address 7907 S GESSNER RD

City  
HOUSTON

State  
TX

Zip Code  
77036

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 ▼

421.42

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 24 / 2020

Transaction ID : SA11AI.104969

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LANNERT, ROBERT, , ,

Mailing Address 106 SHORE OAKS CT

City  
LAKEWAY

State  
TX

Zip Code  
78738

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 21 / 2020

Transaction ID : SA11AI.105059

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAYTON, EVA, , ,

Mailing Address 809 BUNKER HILL DRIVE

City  
CARSON CITY

State  
NV

Zip Code  
89703

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 ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 03 / 2020

Transaction ID : SA11AI.105119

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LAYTON, EVA, , ,

Mailing Address 809 BUNKER HILL DRIVE

City  
CARSON CITYState  
NVZip Code  
89703FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 05 / 2020

Transaction ID : SA11Al.105120

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAYTON, EVA, , ,

Mailing Address 809 BUNKER HILL DRIVE

City  
CARSON CITYState  
NVZip Code  
89703FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 19 / 2020

Transaction ID : SA11Al.105118

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEACH, JOHN, , ,

Mailing Address 2485 RUE DU JARDIN

City  
NAPLESState  
FLZip Code  
34105FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 05 / 2020

Transaction ID : SA11Al.105140

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

155.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEE, ELEANOR, , ,**

Mailing Address 1930 W RIVER BEND CT

City  
MEQUON

State  
WI

Zip Code  
53092

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 ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 13 / 2020

Transaction ID : SA11Al.105165

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEE, ELEANOR, , ,**

Mailing Address 1930 W RIVER BEND CT

City  
MEQUON

State  
WI

Zip Code  
53092

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 ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11Al.105164

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEVY, LINDA, , ,**

Mailing Address 9059 SANDERSON CT

City  
BOYNTON BEACH

State  
FL

Zip Code  
33473

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 / D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11Al.105256

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1350.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LILLY, KEVIN, , ,**

Mailing Address 3507 WOODLAND POINTE DR

City  
SAINT JOSEPH

State  
MO

Zip Code  
64506

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ST JOSEPH BEVERAGE

Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11AI.105314

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LINDAHL, CHARLES, , ,**

Mailing Address 502 RIVER POINTE DR

City  
CONROE

State  
TX

Zip Code  
77304

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 13 / 2020

Transaction ID : SA11AI.105321

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LINDSTROM, KEITH, , ,**

Mailing Address 438 DEER RUN DR

City  
CENTRAL SQUARE

State  
NY

Zip Code  
13036

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 ▼

391.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 09 / 2020

Transaction ID : SA11AI.105353

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LINDSTROM, KEITH, , ,**

Mailing Address 438 DEER RUN DR

City

CENTRAL SQUARE

State

NY

Zip Code

13036

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 ▼

392.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11Al.105351

Amount of Each Receipt this Period

1.00



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LINDSTROM, KEITH, , ,**

Mailing Address 438 DEER RUN DR

City

CENTRAL SQUARE

State

NY

Zip Code

13036

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 ▼

397.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11Al.105352

Amount of Each Receipt this Period

5.00



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LINDSTROM, KEITH, , ,**

Mailing Address 438 DEER RUN DR

City

CENTRAL SQUARE

State

NY

Zip Code

13036

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 ▼

427.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11Al.105354

Amount of Each Receipt this Period

30.00



Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

36.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LINDSTROM, KEITH, , ,

Mailing Address 438 DEER RUN DR

City  
CENTRAL SQUARE

State  
NY

Zip Code  
13036

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 ▼

457.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11AI.105355

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LINDSTROM, KEITH, , ,

Mailing Address 438 DEER RUN DR

City  
CENTRAL SQUARE

State  
NY

Zip Code  
13036

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 ▼

487.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11AI.105356

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LOISELLE, EMILIEN, , ,

Mailing Address 2812 ASHTON TREE PL

City  
DACULA

State  
GA

Zip Code  
30019

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11AI.105416

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

560.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LORENZ, MICHAEL, , ,**

Mailing Address 13714 SABLESPRINGS LN

City  
HOUSTON

State  
TX

Zip Code  
77014

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AIRSWIFT

Occupation (for Individual)  
PETROLEUM ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.48

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11AI.105456

Amount of Each Receipt this Period

104.48

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LORENZO, GREGORY, , ,**

Mailing Address 740 E WALKER ST

City  
ORLAND

State  
CA

Zip Code  
95963

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 22 / 2020

Transaction ID : SA11AI.105457

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOZANO, JOSE, , ,**

Mailing Address 2422 S MYSTIC MEADOW

City  
HOUSTON

State  
TX

Zip Code  
77021

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 ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2020

Transaction ID : SA11AI.105495

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

304.48



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LUMANLAN, ORLANDO, O, ,

Mailing Address 36 BRIGHTON DR

City  
VALLEJOState  
CAZip Code  
94591FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 23 / 2020

Transaction ID : SA11Al.105520

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LUMANLAN, ORLANDO, O, ,

Mailing Address 36 BRIGHTON DR

City  
VALLEJOState  
CAZip Code  
94591FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 28 / 2020

Transaction ID : SA11Al.105517

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LUMANLAN, ORLANDO, O, ,

Mailing Address 36 BRIGHTON DR

City  
VALLEJOState  
CAZip Code  
94591FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

269.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11Al.105515

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

95.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUMANLAN, ORLANDO, O, ,**

Mailing Address 36 BRIGHTON DR

City  
VALLEJO

State  
CA

Zip Code  
94591

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 ▼

279.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11Al.105516

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUNDQUIST, DAVID, , ,**

Mailing Address 6277 N OCEAN BLVD

City

BOYNTON BEACH

State

FL

Zip Code

33435

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 ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11Al.105532

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUNDQUIST, DAVID, , ,**

Mailing Address 6277 N OCEAN BLVD

City

BOYNTON BEACH

State

FL

Zip Code

33435

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 ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11Al.105533

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

210.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LUNDQUIST, DAVID, , ,

Mailing Address 6277 N OCEAN BLVD

City  
BOYNTON BEACH

State  
FL

Zip Code  
33435

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 ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11Al.105534

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LYNN, LARRY, , ,

Mailing Address 7415 SW EAST LAKE CT

City  
WILSONVILLE

State  
OR

Zip Code  
97070

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 01 / 2020

Transaction ID : SA11Al.105570

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MACDOWELL, RICHARD, , ,

Mailing Address 36 WINDSOR CT

City  
DELMAR

State  
NY

Zip Code  
12054

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 20 / 2020

Transaction ID : SA11Al.105589

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

450.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARINE, KAY, , ,**

Mailing Address 619 GARDNER ST

City  
WAYZATA

State  
MN

Zip Code  
55391

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2020

Transaction ID : SA11AI.105726

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARINE, KAY, , ,**

Mailing Address 619 GARDNER ST

City  
WAYZATA

State  
MN

Zip Code  
55391

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11AI.105727

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARNICH, PAUL, , ,**

Mailing Address 625 ELLFRED CT

City  
SANTA PAULA

State  
CA

Zip Code  
93060

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TIDWELL EXCAVATION

Occupation (for Individual)  
PLANNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 20 / 2020

Transaction ID : SA11AI.105740

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTIN, DOUGLAS, , ,**

Mailing Address 1310 E SWAIN RD

City  
STOCKTON

State  
CA

Zip Code  
95210

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
DENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 18 / 2020

Transaction ID : SA11Al.105787

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTIN, MARSHALL, , ,**

Mailing Address 36075 MURRAY LN

City  
SOLDOTNA

State  
AK

Zip Code  
99669

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AAJC

Occupation (for Individual)  
PASTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 05 / 2020

Transaction ID : SA11Al.105798

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARTINSON, RODNEY, R, ,**

Mailing Address 13531 W SKY HAWK DR

City  
SUN CITY WEST

State  
AZ

Zip Code  
85375-5832

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 ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 11 / 2020

Transaction ID : SA11Al.105828

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

225.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MARTINSON, RODNEY, R, ,**

Mailing Address 13531 W SKY HAWK DR

City  
SUN CITY WEST

State  
AZ

Zip Code  
85375-5832

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 ▼

236.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 12 / 2020

Transaction ID : SA11AI.105829

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARX, RICHARD, , ,**

Mailing Address 46991 RIDGEVIEW DR

City  
WELLESLEY ISLAND

State  
NY

Zip Code  
13640

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 22 / 2020

Transaction ID : SA11AI.105835

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAYHEW, RICHARD, , ,**

Mailing Address 1658 KEATON LN

City  
COLORADO SPRINGS

State  
CO

Zip Code  
80909

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
CONSTRUCTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.105921

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

525.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCORKLE, ANN, G, ,**

Mailing Address P.O. BOX 8152

City  
SOUTH CHARLESTON

State  
WV

Zip Code  
25303

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 ▼

229.47

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11AI.105993

Amount of Each Receipt this Period

104.48

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCDONALD, SUSAN, , ,**

Mailing Address 22351 SUNBROOK

City  
MISSION VIEJO

State  
CA

Zip Code  
92692

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11AI.106030

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCEWAN, JOHN, , ,**

Mailing Address 1871 TURNBERRY TER

City  
ORLANDO

State  
FL

Zip Code  
32804

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 / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.106045

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1204.48

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCFADDEN, ROYCE, , ,**

Mailing Address 1250 FM 168

City  
OLTON

State  
TX

Zip Code  
79064

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 02 / 2020

Transaction ID : SA11AI.106047

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCMAHON, LINDA, E, ,**

Mailing Address 1055 WASHINGTON BLVD.

City  
STAMFORD

State  
CT

Zip Code  
06901

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AMERICA FIRST ACTION, INC

Occupation (for Individual)  
CHAIR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275450.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11AI.111711

Amount of Each Receipt this Period

152436.00

☐ Memo Item

IN-KIND - TRAVEL: AIR

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCPHERSON, KATHLEEN, , ,**

Mailing Address 2050 CANAL ST

City  
COMMERCE TOWNSHIP

State  
MI

Zip Code  
48382

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TRADER JOES

Occupation (for Individual)  
RETAIL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.106159

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

153186.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCQUADE, DAVID, , ,

Mailing Address 3675 RONSTADT RD

City  
THOMPSON'S STATIONState  
TNZip Code  
37179FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
CONSULTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 05 / 2020

Transaction ID : SA11Al.106160

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCREYNOLDS, JAMES, , ,

Mailing Address 200 BRICKLE SPRINGS RD

City  
CAVE CITYState  
ARZip Code  
72521FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
TRUCKING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 22 / 2020

Transaction ID : SA11Al.106174

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MEDVE, JAKOB, , ,

Mailing Address 3401 LEE PKWY  
2203City  
DALLASState  
TXZip Code  
75219FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
REAL ESATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 13 / 2020

Transaction ID : SA11Al.106199

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

500.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MEIGS, ROBERT, , ,**

Mailing Address 49 LINE ROAD

City  
MALVERN

State  
PA

Zip Code  
19355

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 ▼

217.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 18 / 2020

Transaction ID : SA11AI.106216

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MEIGS, ROBERT, , ,**

Mailing Address 49 LINE ROAD

City  
MALVERN

State  
PA

Zip Code  
19355

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 ▼

227.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11AI.106214

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MELBY, MARYANN, , ,**

Mailing Address 20322 92ND AVE S

City  
KENT

State  
WA

Zip Code  
98031

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 21 / 2020

Transaction ID : SA11AI.106231

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

295.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MELLON, TIMOTHY, , ,

Mailing Address P.O. BOX 1500

City  
SARATOGA

State  
WY

Zip Code  
82331-1500

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 14 / 2020

Transaction ID : SA11AI.106243

Amount of Each Receipt this Period

10000000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MERRILL, LAVERNE, , ,

Mailing Address 27 N TIETJEN ST

City  
RAMAH

State  
NM

Zip Code  
87321

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 ▼

261.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11AI.106285

Amount of Each Receipt this Period

65.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLER, JOAN, , ,

Mailing Address 10901 176TH CIR NE  
#4527

City  
REDMOND

State  
WA

Zip Code  
98052

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.106388

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10000115.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MINER, B, J, ,**

Mailing Address 5386 GARDENBROOK BLVD

City  
MILTON

State  
FL

Zip Code  
32570

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 ▼

200.49

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11Al.106441

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MITSCH, MARILYN, , ,**

Mailing Address 4 CHARLEY LAKE CT

City  
SAINT PAUL

State  
MN

Zip Code  
55127

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 ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 18 / 2020

Transaction ID : SA11Al.106479

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MIZELL, WALKER, , ,**

Mailing Address 45120 DORMAN PL

City  
CALLAHAN

State  
FL

Zip Code  
32011

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 20 / 2020

Transaction ID : SA11Al.106482

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

180.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOODY, BRAXTON, , ,

Mailing Address 212 SHERWOOD LN

City  
CROWLEYState  
LAZip Code  
70526FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 12 / 2020

Transaction ID : SA11AI.106541

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MORDEN, JAMES, , ,

Mailing Address P.O. BOX 478

City  
HARTWOODState  
VAZip Code  
22471FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11AI.106578

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MORDEN, JAMES, , ,

Mailing Address P.O. BOX 478

City  
HARTWOODState  
VAZip Code  
22471FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.106582

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

135.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORDEN, JAMES, , ,**

Mailing Address P.O. BOX 478

City  
HARTWOOD

State  
VA

Zip Code  
22471

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 ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2020

Transaction ID : SA11AI.106579

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORDEN, JAMES, , ,**

Mailing Address P.O. BOX 478

City  
HARTWOOD

State  
VA

Zip Code  
22471

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 ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2020

Transaction ID : SA11AI.106580

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORDEN, JAMES, , ,**

Mailing Address P.O. BOX 478

City  
HARTWOOD

State  
VA

Zip Code  
22471

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 ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.106581

Amount of Each Receipt this Period

10.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

30.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOREY, JOAN, , ,**

Mailing Address 209 W JUNIPER

City  
WILDWOOD

State  
NJ

Zip Code  
08260

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LONG & FOSTER REAL ESTATE

Occupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 22 / 2020

Transaction ID : SA11AI.106595

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORSE, CHARLES, , ,**

Mailing Address 2010 BOND ST

City  
NILES

State  
MI

Zip Code  
49120

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 20 / 2020

Transaction ID : SA11AI.106642

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MULDER, LEON, , ,**

Mailing Address 310 HUBBARD AVE

City  
DOON

State  
IA

Zip Code  
51235

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MULDER EQUIPMENT SALES INC

Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 18 / 2020

Transaction ID : SA11AI.106693

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

225.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MURPHY, ANNE, , ,**

Mailing Address 19951 COLLIER ST.

City  
WOODLAND HILLS

State  
CA

Zip Code  
91364

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 ▼

272.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 01 / 2020

Transaction ID : SA11Al.106717

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MURPHY, ANNE, , ,**

Mailing Address 19951 COLLIER ST.

City  
WOODLAND HILLS

State  
CA

Zip Code  
91364

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 ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 04 / 2020

Transaction ID : SA11Al.106716

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MURPHY, ANNE, , ,**

Mailing Address 19951 COLLIER ST.

City  
WOODLAND HILLS

State  
CA

Zip Code  
91364

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 ▼

323.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 04 / 2020

Transaction ID : SA11Al.106719

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

76.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MURPHY, ANNE, , ,**

Mailing Address 19951 COLLIER ST.

City  
WOODLAND HILLS

State  
CA

Zip Code  
91364

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 ▼

358.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 21 / 2020

Transaction ID : SA11AI.106718

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NELSON, CARMILLA, , ,**

Mailing Address 17271 350TH ST

City  
SHAFER

State  
MN

Zip Code  
55074

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.106861

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEWELL, GUY, , ,**

Mailing Address 732 S 11TH ST

City  
NILES

State  
MI

Zip Code  
49120

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LEONARDO DRS

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 22 / 2020

Transaction ID : SA11AI.106919

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

335.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NGUYEN, HUONG, , ,**

Mailing Address 8613 AVIARY WOODS WAY

City  
ELK GROVE

State  
CA

Zip Code  
95624

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 ▼

215.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2020

Transaction ID : SA11AI.106952

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NGUYEN, HUONG, , ,**

Mailing Address 8613 AVIARY WOODS WAY

City  
ELK GROVE

State  
CA

Zip Code  
95624

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 ▼

240.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2020

Transaction ID : SA11AI.106954

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NGUYEN, HUONG, , ,**

Mailing Address 8613 AVIARY WOODS WAY

City  
ELK GROVE

State  
CA

Zip Code  
95624

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11AI.106943

Amount of Each Receipt this Period

10.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NGUYEN, HUONG, , ,

Mailing Address 8613 AVIARY WOODS WAY

City

ELK GROVE

State

CA

Zip Code

95624

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 ▼

260.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11AI.106944

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NGUYEN, HUONG, , ,

Mailing Address 8613 AVIARY WOODS WAY

City

ELK GROVE

State

CA

Zip Code

95624

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 ▼

280.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11AI.106946

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NGUYEN, HUONG, , ,

Mailing Address 8613 AVIARY WOODS WAY

City

ELK GROVE

State

CA

Zip Code

95624

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11AI.106947

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

50.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NGUYEN, HUONG, , ,**

Mailing Address 8613 AVIARY WOODS WAY

City  
ELK GROVE

State  
CA

Zip Code  
95624

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 ▼

325.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11AI.106953

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OCKERLUND, WILLIAM, , ,**

Mailing Address 510 W 17TH ST

City  
HOLLAND

State  
MI

Zip Code  
49423

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
FINANCIAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.107112

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OCKERLUND, WILLIAM, , ,**

Mailing Address 510 W 17TH ST

City  
HOLLAND

State  
MI

Zip Code  
49423

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
FINANCIAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1004.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.107113

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1025.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OLIVETTI, SYLVIA, , ,**

Mailing Address 2833 PETAR PL

City  
ANTIOCH

State  
CA

Zip Code  
94509

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 03 / 2020

Transaction ID : SA11Al.107169

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLIVETTI, SYLVIA, , ,**

Mailing Address 2833 PETAR PL

City  
ANTIOCH

State  
CA

Zip Code  
94509

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 ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 03 / 2020

Transaction ID : SA11Al.107170

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OLK, ARLYNNE, , ,**

Mailing Address 2732 NEW COPELAND RD

City  
TYLER

State  
TX

Zip Code  
75701

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 22 / 2020

Transaction ID : SA11Al.107178

Amount of Each Receipt this Period

35.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

235.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OLSON, LARRY, , ,**

Mailing Address N77 W22240 WOODED HILLS DR

City  
SUSSEX

State  
WI

Zip Code  
53089

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 ▼

204.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11Al.107204

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLSON, LARRY, , ,**

Mailing Address N77 W22240 WOODED HILLS DR

City  
SUSSEX

State  
WI

Zip Code  
53089

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 ▼

209.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11Al.107199

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OLSON, LARRY, , ,**

Mailing Address N77 W22240 WOODED HILLS DR

City  
SUSSEX

State  
WI

Zip Code  
53089

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 ▼

259.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11Al.107207

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

80.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OLSON, LARRY, , ,**

Mailing Address N77 W22240 WOODED HILLS DR

City  
SUSSEX

State  
WI

Zip Code  
53089

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 ▼

309.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11Al.107208

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ORMOND, AL, , ,**

Mailing Address 855 SUMNER PKWY

City  
AKRON

State  
OH

Zip Code  
44321

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 11 / 2020

Transaction ID : SA11Al.107245

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. P'POOL, MELINDA, GAIL, ,**

Mailing Address 3316 NE 42ND CT

City  
FORT LAUDERDALE

State  
FL

Zip Code  
33308

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 19 / 2020

Transaction ID : SA11Al.107853

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

650.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PASSER, SANFORD, , ,**

Mailing Address 28400 NORTHWESTERN HWY  
SUITE 130

City  
SOUTHFIELD

State  
MI

Zip Code  
48034

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 20 / 2020

Transaction ID : SA11AI.107434

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PERRIZO, KATHY, , ,**

Mailing Address 6243 PARKHURST DRIVE

City  
GOLETA

State  
CA

Zip Code  
93117

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 03 / 2020

Transaction ID : SA11AI.107559

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PERRIZO, KATHY, , ,**

Mailing Address 6243 PARKHURST DRIVE

City  
GOLETA

State  
CA

Zip Code  
93117

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 ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 14 / 2020

Transaction ID : SA11AI.107560

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

110.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PHARES, JAMES, , ,**

Mailing Address 33228 W 12 MILE RD  
#317

City  
FARMINGTON

State  
MI

Zip Code  
48334

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 ▼

218.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 08 / 2020

Transaction ID : SA11AI.107647

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PICKARD, TINA, , ,**

Mailing Address 430 PICKARD RD

City  
FORT VALLEY

State  
GA

Zip Code  
31030

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PICKARD SALES CO

Occupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 07 / 2020

Transaction ID : SA11AI.107689

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PIERCE, JONATHAN, , ,**

Mailing Address 123 MONTROSE DR

City  
MADISON

State  
AL

Zip Code  
35758

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 10 / 2020

Transaction ID : SA11AI.107701

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

375.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PIERCE, MARTA, , ,**

Mailing Address 4116 LATIMER LN

City  
MOBILE

State  
AL

Zip Code  
36609

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 05 / 2020

Transaction ID : SA11Al.107703

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POPA, MILITA, , ,**

Mailing Address 158 CYPRESS POINT RD

City  
HALF MOON BAY

State  
CA

Zip Code  
94019

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 22 / 2020

Transaction ID : SA11Al.107805

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POPP, CAROL, , ,**

Mailing Address 29 RAMAPOO RD

City  
RIDGEFIELD

State  
CT

Zip Code  
06877

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11Al.107810

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POST, WILLIAM, , ,**

Mailing Address 5882 STERLING LN

City  
BOISE

State  
ID

Zip Code  
83703-3028

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 ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 08 / 2020

Transaction ID : SA11Al.107820

Amount of Each Receipt this Period

65.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POTTER, DOUGLAS, , ,**

Mailing Address 347 SUGARLOAF HEIGHTS RD

City  
DRUMS

State  
PA

Zip Code  
18222

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 ▼

312.81

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2020

Transaction ID : SA11Al.107825

Amount of Each Receipt this Period

312.81

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POUBLON, BRIGITTE, , ,**

Mailing Address P.O. BOX 491385

City  
LOS ANGELES

State  
CA

Zip Code  
90049

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 01 / 2020

Transaction ID : SA11Al.107828

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

477.81

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PUCKETT, DAVID, , ,**

Mailing Address 2161 PARC MONCEAU DR W

City  
TUPELO

State  
MS

Zip Code  
38804

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.107930

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAIBLE, LAWRENCE, , ,**

Mailing Address 7709 CHARRON CT

City  
LOUISVILLE

State  
KY

Zip Code  
40220

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2020

Transaction ID : SA11AI.108022

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RASKU, WAYNE, , ,**

Mailing Address 10 BEVERLY ST  
APT 2

City  
OXFORD

State  
MA

Zip Code  
01540

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLED

Occupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1179.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 03 / 2020

Transaction ID : SA11AI.108093

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

450.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RASKU, WAYNE, , ,**

Mailing Address 10 BEVERLY ST  
APT 2

City  
OXFORD

State  
MA

Zip Code  
01540

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLED

Occupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1209.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11AI.108092

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REEVES, SCOTT, , ,**

Mailing Address 240 11TH ST

City

RAGLAND

State

AL

Zip Code

35131

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NATIONAL CEMENT

Occupation (for Individual)  
CEMS TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.108130

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. REEVES, SCOTT, , ,**

Mailing Address 240 11TH ST

City

RAGLAND

State

AL

Zip Code

35131

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NATIONAL CEMENT

Occupation (for Individual)  
CEMS TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.108131

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

56.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. REVIE, CHARLES, , ,

Mailing Address 720 SUNDOWN CT

City  
LAS CRUCESState  
NMZip Code  
88011FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 24 / 2020

Transaction ID : SA11Al.108179

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RICE, JAY, , ,

Mailing Address 875 PLUMAS ST

City  
SUSANVILLEState  
CAZip Code  
96130FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 18 / 2020

Transaction ID : SA11Al.108222

Amount of Each Receipt this Period

95.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RICE, JAY, , ,

Mailing Address 875 PLUMAS ST

City  
SUSANVILLEState  
CAZip Code  
96130FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 18 / 2020

Transaction ID : SA11Al.108223

Amount of Each Receipt this Period

95.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

440.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 167 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RIPA, LAWRENCE, , ,**

Mailing Address 5 TAMMI CT

City  
KINGS PARK

State  
NY

Zip Code  
11754

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 ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11AI.108297

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RITCHIE, NORMAN, , ,**

Mailing Address 2396 GARRETT RD  
APT 1

City  
BRANDENBURG

State  
KY

Zip Code  
40108

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 ▼

207.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 11 / 2020

Transaction ID : SA11AI.108315

Amount of Each Receipt this Period

10.73

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RITCHIE, NORMAN, , ,**

Mailing Address 2396 GARRETT RD  
APT 1

City  
BRANDENBURG

State  
KY

Zip Code  
40108

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 ▼

217.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 14 / 2020

Transaction ID : SA11AI.108311

Amount of Each Receipt this Period

10.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

120.73

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 168 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RITCHIE, NORMAN, , ,**

Mailing Address 2396 GARRETT RD  
APT 1

City  
BRANDENBURG

State  
KY

Zip Code  
40108

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 ▼

227.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 14 / 2020

Transaction ID : SA11Al.108312

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RITCHIE, NORMAN, , ,**

Mailing Address 2396 GARRETT RD  
APT 1

City  
BRANDENBURG

State  
KY

Zip Code  
40108

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 ▼

232.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11Al.108308

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RITCHIE, NORMAN, , ,**

Mailing Address 2396 GARRETT RD  
APT 1

City  
BRANDENBURG

State  
KY

Zip Code  
40108

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 ▼

242.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11Al.108313

Amount of Each Receipt this Period

10.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

25.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 169 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RITCHIE, NORMAN, , ,

Mailing Address 2396 GARRETT RD  
APT 1

City  
BRANDENBURG

State  
KY

Zip Code  
40108

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 ▼

248.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 17 / 2020

Transaction ID : SA11Al.108309

Amount of Each Receipt this Period

5.52

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RITCHIE, NORMAN, , ,

Mailing Address 2396 GARRETT RD  
APT 1

City  
BRANDENBURG

State  
KY

Zip Code  
40108

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 ▼

253.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 17 / 2020

Transaction ID : SA11Al.108310

Amount of Each Receipt this Period

5.52

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RITCHIE, NORMAN, , ,

Mailing Address 2396 GARRETT RD  
APT 1

City  
BRANDENBURG

State  
KY

Zip Code  
40108

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 ▼

263.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 23 / 2020

Transaction ID : SA11Al.108314

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

21.04

TOTAL This Period (last page this line number only)..... ►

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 170 OF 282

(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)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RITCHIE, NORMAN, , ,

Mailing Address 2396 GARRETT RD  
APT 1City  
BRANDENBURGState  
KYZip Code  
40108FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2020

Transaction ID : SA11Al.108317

Amount of Each Receipt this Period

21.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROBINS, WALTER, , , III

Mailing Address 3001 W BINNICKER AVE

City  
TAMPAState  
FLZip Code  
33611FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
G4S SECURE SOLUTIONSOccupation (for Individual)  
SECURITY OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	28	/	2020

Transaction ID : SA11Al.108387

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RODACK, MARK, , ,

Mailing Address 16051 COLLINS AVENUE

City  
SUNNY ISLES BEACHState  
FLZip Code  
33160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	18	/	2020

Transaction ID : SA11Al.108407

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

171.15

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RODACK, MARK, , ,**

Mailing Address 16051 COLLINS AVENUE

City

SUNNY ISLES BEACH

State

FL

Zip Code

33160

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 23 / 2020

Transaction ID : SA11Al.108408

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RODACK, MARK, , ,**

Mailing Address 16051 COLLINS AVENUE

City

SUNNY ISLES BEACH

State

FL

Zip Code

33160

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 ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2020

Transaction ID : SA11Al.108409

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAILER, BECKY, , ,**

Mailing Address 101 HIDDEN MEADOWS LN

City

SUPERIOR

State

MT

Zip Code

59872

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 ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2020

Transaction ID : SA11Al.108689

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SAILER, BECKY, , ,**

Mailing Address 101 HIDDEN MEADOWS LN

City  
SUPERIORState  
MTZip Code  
59872FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		22		2020

Transaction ID : SA11AI.108688

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANDERS, SANDRA, , ,**

Mailing Address 3193 COUNTRY CLUB CT

City  
KENNESAWState  
GAZip Code  
30144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2020

Transaction ID : SA11AI.108755

Amount of Each Receipt this Period

26.35

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHMIDT, CARL, , ,**

Mailing Address 56 WAVE ST

City  
BEACHWOODState  
NJZip Code  
08722FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		27		2020

Transaction ID : SA11AI.108889

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

151.35

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHNETTLER, WILLIAM, , ,**

Mailing Address 8294 QUAIL PT RD

City  
NEENAH

State  
WI

Zip Code  
54956

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CONTRACT CONVERTING, LLC

Occupation (for Individual)  
PRESIDENT/OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.108912

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHUFF, NANCY, , ,**

Mailing Address 14412 N COTTON LN

City  
SURPRISE

State  
AZ

Zip Code  
85388

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 23 / 2020

Transaction ID : SA11AI.108938

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHULER, BETH, , ,**

Mailing Address 1004 PEBBLE BROOK

City  
NASHVILLE

State  
TN

Zip Code  
37221

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
PET CARE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 12 / 2020

Transaction ID : SA11AI.108939

Amount of Each Receipt this Period

35.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

385.00

# **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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHULER, BETH, , ,**

Mailing Address 1004 PEBBLE BROOK

City  
NASHVILLE

State  
TN

Zip Code  
37221

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
PET CARE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 21 / 2020

Transaction ID : SA11AI.108940

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHULTZ, MARY ANN, , ,**

Mailing Address P.O. BOX 3814

City  
CARMEL

State  
CA

Zip Code  
93921

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 05 / 2020

Transaction ID : SA11AI.108947

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHULZ, REINHARD, , ,**

Mailing Address 4849 NORTHRIDGE DR

City  
SOMIS

State  
CA

Zip Code  
93066

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 ▼

294.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 22 / 2020

Transaction ID : SA11AI.108950

Amount of Each Receipt this Period

88.85

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

388.85

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SEALE, ROBERT, , ,

Mailing Address 6627 WANITA PL

City  
HOUSTONState  
TXZip Code  
77007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
ATTORNEY

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  
04 / 04 / 2020

Transaction ID : SA11AI.109024

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SEALE, ROBERT, , ,

Mailing Address 280 CAMINO SUR

City  
PALM SPRINGSState  
CAZip Code  
92262FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 22 / 2020

Transaction ID : SA11AI.109025

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SEE, JAMES, , ,

Mailing Address P.O. BOX 4421

City  
CARLSBADState  
CAZip Code  
92018FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 05 / 2020

Transaction ID : SA11AI.109045

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

625.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SEE, JAMES, , ,

Mailing Address P.O. BOX 4421

City  
CARLSBAD

State  
CA

Zip Code  
92018

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 ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 05 / 2020

Transaction ID : SA11AI.109046

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHAO, JACK, , ,

Mailing Address 19 COOLIDGE RD

City  
WINCHESTER

State  
MA

Zip Code  
01890

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 ▼

11000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 23 / 2020

Transaction ID : SA11AI.109106

Amount of Each Receipt this Period

4000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHEDDEN, GERALD, , ,

Mailing Address 3214 ST ANDREWS RD

City  
FAIRFIELD

State  
CA

Zip Code  
94534

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 21 / 2020

Transaction ID : SA11AI.109146

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

4135.00

TOTAL This Period (last page this line number only).....▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHINE, CAROL, , ,**

Mailing Address 901 S LEE ST

City  
GARRETT

State  
IN

Zip Code  
46738

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 ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2020

Transaction ID : SA11AI.109185

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHINE, CAROL, , ,**

Mailing Address 901 S LEE ST

City  
GARRETT

State  
IN

Zip Code  
46738

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 ▼

311.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2020

Transaction ID : SA11AI.109186

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SILVA, ALVARO, J, ,**

Mailing Address 700 SUNSET DR

City  
CORAL GABLES

State  
FL

Zip Code  
33143

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 12 / 2020

Transaction ID : SA11AI.109250

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SIMON, ALLEN, , ,**

Mailing Address 1383 N CRISS ST

City  
CHANDLER

State  
AZ

Zip Code  
85226

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 13 / 2020

Transaction ID : SA11AI.109269

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMENT, JEFF, , ,**

Mailing Address W314 N390 LARA LN

City  
DELAFIELD

State  
WI

Zip Code  
53018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ISC, INC.

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 19 / 2020

Transaction ID : SA11AI.109355

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, LOLA, , ,**

Mailing Address 5322 ABBINGTON AVE

City  
PLAINFIELD

State  
IN

Zip Code  
46168

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 01 / 2020

Transaction ID : SA11AI.109411

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

550.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, MICHAEL, , ,**

Mailing Address 691 IONE AVE NE

City  
MINNEAPOLIS

State  
MN

Zip Code  
55432

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MAXIMUM FIRST AID

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 07 / 2020

Transaction ID : SA11AI.109422

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, ROY, , ,**

Mailing Address 7566 W DIVISION RD

City  
LARWILL

State  
IN

Zip Code  
46764

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 19 / 2020

Transaction ID : SA11AI.109440

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, WILLIAM, , ,**

Mailing Address 3615 S GALLOWAY DR

City  
MEMPHIS

State  
TN

Zip Code  
38111

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 05 / 2020

Transaction ID : SA11AI.109478

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SOUKUP, ELAINE, , ,

Mailing Address 298 W LIBERTY LN

City  
GILBERT

State  
AZ

Zip Code  
85233

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 ▼

263.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.109561

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SOUKUP, ELAINE, , ,

Mailing Address 298 W LIBERTY LN

City  
GILBERT

State  
AZ

Zip Code  
85233

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 ▼

313.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.109562

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SOVERNS, ELIZABETH, , ,

Mailing Address PO BOX 1357

City  
ANGELS CAMP

State  
CA

Zip Code  
95222-1357

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 ▼

206.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 22 / 2020

Transaction ID : SA11AI.109576

Amount of Each Receipt this Period

26.35

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

81.35

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SPRECHER, JEFFREY, , ,

Mailing Address 5660 NEW NORTHSIDE DR NW

City  
ATLANTA

State  
GA

Zip Code  
30328

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERCONTINENTAL EXCHANGE, INC

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.109649

Amount of Each Receipt this Period

1000000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STAFSHOLT, RICHARD, , ,

Mailing Address 1582 130TH AVE

City  
NEW RICHMOND

State  
WI

Zip Code  
54017

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 01 / 2020

Transaction ID : SA11AI.109672

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STALEY, SUSAN, , ,

Mailing Address 1255 PONTIAC AVE

City  
CLOVIS

State  
CA

Zip Code  
93612

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.109677

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

1000350.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STARCEVICH, KIEL, , ,**

Mailing Address 1286 NICOLAS LN

City  
NORTH LIBERTY

State  
IA

Zip Code  
52317

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PIZZAS

Occupation (for Individual)  
DIRECT STORE DELIVERY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 19 / 2020

Transaction ID : SA11AI.109701

Amount of Each Receipt this Period

4.99

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STARCEVICH, KIEL, , ,**

Mailing Address 1286 NICOLAS LN

City  
NORTH LIBERTY

State  
IA

Zip Code  
52317

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PIZZAS

Occupation (for Individual)  
DIRECT STORE DELIVERY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.98

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 19 / 2020

Transaction ID : SA11AI.109702

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENS, LINDA, , ,**

Mailing Address 150 W HEMLOCK PL

City  
ELMA

State  
WA

Zip Code  
98541

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 ▼

227.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 03 / 2020

Transaction ID : SA11AI.109794

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

79.99

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEVENS, LINDA, , ,**

Mailing Address 150 W HEMLOCK PL

City  
ELMA

State  
WA

Zip Code  
98541

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 ▼

232.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 17 / 2020

Transaction ID : SA11AI.109791

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVENS, LINDA, , ,**

Mailing Address 150 W HEMLOCK PL

City  
ELMA

State  
WA

Zip Code  
98541

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 ▼

242.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 17 / 2020

Transaction ID : SA11AI.109792

Amount of Each Receipt this Period

10.73

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STEVENS, LINDA, , ,**

Mailing Address 150 W HEMLOCK PL

City  
ELMA

State  
WA

Zip Code  
98541

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 ▼

253.46

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 17 / 2020

Transaction ID : SA11AI.109793

Amount of Each Receipt this Period

10.73

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

26.46

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ST JOHN, EDWIN, , ,**

Mailing Address 12985 PANORAMA CT

City  
LAS CRUCES

State  
NM

Zip Code  
88007

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
BUSINESSMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 14 / 2020

Transaction ID : SA11Al.109657

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STROHL, LARRY, , ,**

Mailing Address 6657 S FRANKLIN ST

City  
CENTENNIAL

State  
CO

Zip Code  
80121

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 ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 11 / 2020

Transaction ID : SA11Al.109894

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STROUP, STEVEN, , ,**

Mailing Address 858 GRAND HARBOUR W

City  
MIRAMAR BEACH

State  
FL

Zip Code  
32550

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 18 / 2020

Transaction ID : SA11Al.109896

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

700.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STROUP, STEVEN, , ,

Mailing Address 858 GRAND HARBOUR W

City

MIRAMAR BEACH

State

FL

Zip Code

32550

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 21 / 2020

Transaction ID : SA11AI.109895

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STUTZ, JON, , ,

Mailing Address 13422 205TH AVE SE

City

MONROE

State

WA

Zip Code

98272

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11AI.109911

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SWANSTROM, GORDON, , ,

Mailing Address 5410 ZARA AVE

City

RICHMOND

State

CA

Zip Code

94805

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 22 / 2020

Transaction ID : SA11AI.109989

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

400.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TABB, MARVIN, , ,**

Mailing Address 16440 KELLY COVE DR

City  
FORT MYERS

State  
FL

Zip Code  
33908

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 ▼

356.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11Al.110025

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TARAN, OLGA, , ,**

Mailing Address 16130 SE 5TH ST

City  
BELLEVUE

State  
WA

Zip Code  
98008

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.96

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 21 / 2020

Transaction ID : SA11Al.110076

Amount of Each Receipt this Period

4.99

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TARAN, OLGA, , ,**

Mailing Address 16130 SE 5TH ST

City  
BELLEVUE

State  
WA

Zip Code  
98008

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

333.95

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 21 / 2020

Transaction ID : SA11Al.110077

Amount of Each Receipt this Period

4.99

☐ Memo Item

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**TOTAL** This Period (last page this line number only)..... ►

109.98

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TARAN, OLGA, , ,

Mailing Address 16130 SE 5TH ST

City  
BELLEVUEState  
WAZip Code  
98008FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 28 / 2020

Transaction ID : SA11AI.110078

Amount of Each Receipt this Period

4.99

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TAUBE, TAD, , ,

Mailing Address 1050 RALSTON AVE

City  
BELMONTState  
CAZip Code  
94002FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TAUBE INVESTMENTS, INC.Occupation (for Individual)  
CHAIRMAN/CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 28 / 2020

Transaction ID : SA11AI.110094

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TAYLOR, DAVID, , ,

Mailing Address 7139 OLD MILLSTONE DR

City  
MECHANICSVILLEState  
VAZip Code  
23111FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SAP NS2Occupation (for Individual)  
IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 05 / 2020

Transaction ID : SA11AI.110106

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

354.99

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TENNEY, DUNCAN, , ,**

Mailing Address 26 W CHEYENNE MTN BLVD

City  
COLORADO SPRINGS

State  
CO

Zip Code  
80906

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DVE, LLC

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 04 / 2020

Transaction ID : SA11AI.110148

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TENNEY, DUNCAN, , ,**

Mailing Address 26 W CHEYENNE MTN BLVD

City  
COLORADO SPRINGS

State  
CO

Zip Code  
80906

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DVE, LLC

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2020

Transaction ID : SA11AI.110149

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TENNEY, DUNCAN, , ,**

Mailing Address 26 W CHEYENNE MTN BLVD

City  
COLORADO SPRINGS

State  
CO

Zip Code  
80906

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DVE, LLC

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 19 / 2020

Transaction ID : SA11AI.110150

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

750.00

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMAS, CHARLES, , ,**

Mailing Address 3700 MOBILE ST

City  
PINE BLUFF

State  
AR

Zip Code  
71601

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 10 / 2020

Transaction ID : SA11AI.110191

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMPSON, RICHARD, H, ,**

Mailing Address 115 CAMELLIA RD

City  
GOOSE CREEK

State  
SC

Zip Code  
29445

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 02 / 2020

Transaction ID : SA11AI.110228

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THOMPSON, RICHARD, H, ,**

Mailing Address 115 CAMELLIA RD

City  
GOOSE CREEK

State  
SC

Zip Code  
29445

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 21 / 2020

Transaction ID : SA11AI.110229

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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450.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TILLEY, STEVEN, , ,**

Mailing Address 130 WINDERMERE DR

City

PALMYRA

State

PA

Zip Code

17078

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 20 / 2020

Transaction ID : SA11Al.110280

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TIPTON, LORITA, , ,**

Mailing Address 218 VANDERPOOL LN

City

HOUSTON

State

TX

Zip Code

77024

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 27 / 2020

Transaction ID : SA11Al.110299

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TOWNER, ELEANOR, , ,**

Mailing Address 4772 COUNTY RD 140

City

IDER

State

AL

Zip Code

35981

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 ▼

201.97

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2020

Transaction ID : SA11Al.110362

Amount of Each Receipt this Period

5.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

355.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TOWNER, ELEANOR, , ,**

Mailing Address 4772 COUNTY RD 140

City  
IDER

State  
AL

Zip Code  
35981

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 ▼

251.97

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2020

Transaction ID : SA11AI.110369

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TRACY, PAUL, J, ,**

Mailing Address 1025 PARK PL  
APT 154

City

MISHAWAKA

State  
IN

Zip Code  
46545

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 ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 18 / 2020

Transaction ID : SA11AI.110384

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRADO, CHARLES, , ,**

Mailing Address 31 GILBERT ST

City

RIDGEFIELD

State  
CT

Zip Code  
06877

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 11 / 2020

Transaction ID : SA11AI.110388

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRAMMER, JEROME, , ,**

Mailing Address 7467 MISSION GORGE RD  
#50

City  
SANTEE

State  
CA

Zip Code  
92071

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 12 / 2020

Transaction ID : SA11AI.110394

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TRAPP, BETSY, , ,**

Mailing Address 350 WHISPERING CREEK RD

City

WEST MONROE

State

LA

Zip Code

71291

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 ▼

289.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.110415

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRESTEN, BILL, , ,**

Mailing Address 535 LITTLE JOHN LN

City

HOUSTON

State

TX

Zip Code

77043

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TSA PROCESSING

Occupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.110436

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

375.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TROTTER, BILL, , ,**

Mailing Address 3527 WALTON WAY

City  
AUGUSTA

State  
GA

Zip Code  
30909

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11Al.110474

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ULOTH, RAYMOND, , ,**

Mailing Address 669 CAMERON COURT

City  
KENNER

State  
LA

Zip Code  
70065

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 ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2020

Transaction ID : SA11Al.110547

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VASQUEZ, LISA, , ,**

Mailing Address 3029 NEAL RD

City  
PARADISE

State  
CA

Zip Code  
95969

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 02 / 2020

Transaction ID : SA11Al.110665

Amount of Each Receipt this Period

250.00

☐ Memo Item

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700.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAUGHN, MELINDA, , ,**

Mailing Address 7 LICK FORK RD

City  
SCARBRO

State  
WV

Zip Code  
25917

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 ▼

317.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 07 / 2020

Transaction ID : SA11Al.110675

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAUGHN, MELINDA, , ,**

Mailing Address 7 LICK FORK RD

City  
SCARBRO

State  
WV

Zip Code  
25917

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 ▼

318.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 08 / 2020

Transaction ID : SA11Al.110671

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAUGHN, MELINDA, , ,**

Mailing Address 7 LICK FORK RD

City  
SCARBRO

State  
WV

Zip Code  
25917

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 ▼

319.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 08 / 2020

Transaction ID : SA11Al.110672

Amount of Each Receipt this Period

1.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

22.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAUGHN, MELINDA, , ,**

Mailing Address 7 LICK FORK RD

City  
SCARBRO

State  
WV

Zip Code  
25917

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 ▼

324.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 08 / 2020

Transaction ID : SA11AI.110673

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAUGHN, MELINDA, , ,**

Mailing Address 7 LICK FORK RD

City  
SCARBRO

State  
WV

Zip Code  
25917

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 ▼

344.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 08 / 2020

Transaction ID : SA11AI.110676

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAUGHN, MELINDA, , ,**

Mailing Address 7 LICK FORK RD

City  
SCARBRO

State  
WV

Zip Code  
25917

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 ▼

364.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 08 / 2020

Transaction ID : SA11AI.110677

Amount of Each Receipt this Period

20.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

45.00

# **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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAUGHN, MELINDA, , ,**

Mailing Address 7 LICK FORK RD

City  
SCARBRO

State  
WV

Zip Code  
25917

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 ▼

384.50

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 08 / 2020

Transaction ID : SA11AI.110678

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VAUGHN, MELINDA, , ,**

Mailing Address 7 LICK FORK RD

City  
SCARBRO

State  
WV

Zip Code  
25917

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 ▼

414.50

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 08 / 2020

Transaction ID : SA11AI.110680

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAUGHN, MELINDA, , ,**

Mailing Address 7 LICK FORK RD

City  
SCARBRO

State  
WV

Zip Code  
25917

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 ▼

439.50

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 17 / 2020

Transaction ID : SA11AI.110679

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

75.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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**A. VAUGHN, MELINDA, , ,**

Mailing Address 7 LICK FORK RD

City  
SCARBRO

State  
WV

Zip Code  
25917

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 ▼

444.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 18 / 2020

Transaction ID : SA11AI.110674

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VERS, VICTORIA, , ,**

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELD

State  
CT

Zip Code  
06824

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLED

Occupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11AI.110736

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VERS, VICTORIA, , ,**

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELD

State  
CT

Zip Code  
06824

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLED

Occupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11AI.110737

Amount of Each Receipt this Period

5.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

15.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VERS, VICTORIA, , ,

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11AI.110738

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VERS, VICTORIA, , ,

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11AI.110753

Amount of Each Receipt this Period

8.99

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VERS, VICTORIA, , ,

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

231.38

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11AI.110754

Amount of Each Receipt this Period

8.99

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

22.98

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VERS, VICTORIA, , ,**

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELD

State  
CT

Zip Code  
06824

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLED

Occupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11AI.110761

Amount of Each Receipt this Period

10.73

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VERS, VICTORIA, , ,**

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELD

State  
CT

Zip Code  
06824

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLED

Occupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11AI.110767

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VERS, VICTORIA, , ,**

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELD

State  
CT

Zip Code  
06824

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLED

Occupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

278.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.110717

Amount of Each Receipt this Period

1.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

46.73

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VERS, VICTORIA, , ,

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11Al.110718

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VERS, VICTORIA, , ,

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11Al.110719

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VERS, VICTORIA, , ,

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11Al.110724

Amount of Each Receipt this Period

4.99

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6.99



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VERS, VICTORIA, , ,

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.09

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.110725

Amount of Each Receipt this Period

4.99

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VERS, VICTORIA, , ,

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.110726

Amount of Each Receipt this Period

4.99

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VERS, VICTORIA, , ,

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.110739

Amount of Each Receipt this Period

5.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

14.98

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VERS, VICTORIA, , ,**

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2020

Transaction ID : SA11AI.110740

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VERS, VICTORIA, , ,**

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2020

Transaction ID : SA11AI.110741

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VERS, VICTORIA, , ,**

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

315.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2020

Transaction ID : SA11AI.110742

Amount of Each Receipt this Period

5.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VERS, VICTORIA, , ,

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.110743

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VERS, VICTORIA, , ,

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.110744

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VERS, VICTORIA, , ,

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

330.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.110745

Amount of Each Receipt this Period

5.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

15.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 204 OF 282

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VERS, VICTORIA, , ,

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.07

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.110755

Amount of Each Receipt this Period

8.99

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VERS, VICTORIA, , ,

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.110756

Amount of Each Receipt this Period

8.99

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VERS, VICTORIA, , ,

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

357.05

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.110757

Amount of Each Receipt this Period

8.99

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

26.97

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VERS, VICTORIA, , ,**

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELD

State  
CT

Zip Code  
06824

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLED

Occupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.05

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.110759

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VERS, VICTORIA, , ,**

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELD

State  
CT

Zip Code  
06824

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLED

Occupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.05

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.110760

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VERS, VICTORIA, , ,**

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELD

State  
CT

Zip Code  
06824

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLED

Occupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

402.05

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.110764

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

45.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VERS, VICTORIA, , ,

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.05

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.110765

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VERS, VICTORIA, , ,

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

453.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2020

Transaction ID : SA11AI.110766

Amount of Each Receipt this Period

26.35

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VERS, VICTORIA, , ,

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

458.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.110727

Amount of Each Receipt this Period

4.99

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

56.34

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VERS, VICTORIA, , ,

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

463.38

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11Al.110728

Amount of Each Receipt this Period

4.99

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VERS, VICTORIA, , ,

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.38

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11Al.110746

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VERS, VICTORIA, , ,

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

473.38

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11Al.110747

Amount of Each Receipt this Period

5.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

14.99

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VERS, VICTORIA, , ,

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.38

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.110748

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VERS, VICTORIA, , ,

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.38

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.110749

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VERS, VICTORIA, , ,

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

488.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.110750

Amount of Each Receipt this Period

5.52

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

15.52

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VERS, VICTORIA, , ,

Mailing Address 122 MILLSPAUGH DR

City  
FAIRFIELDState  
CTZip Code  
06824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISABLEDOccupation (for Individual)  
DISABLED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.42

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11Al.110751

Amount of Each Receipt this Period

5.52

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALL, JACK, , ,

Mailing Address 1219 PRESTWICK CT

City  
GRANBURYState  
TXZip Code  
76048FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
112TH JUDICIAL DISTRICTOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 08 / 2020

Transaction ID : SA11Al.110879

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WAPENSKY, DEBBIE, , ,

Mailing Address 6316 S IRONTON CT

City  
ENGLEWOODState  
COZip Code  
80111FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SRSAOccupation (for Individual)  
FINANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

278.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA11Al.110927

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

205.52

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATERS, DOUG, , ,**

Mailing Address 7320 SUSAN SPRINGS DR

City  
WEST CHESTER

State  
OH

Zip Code  
45069

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 23 / 2020

Transaction ID : SA11AI.110967

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WATTLES, GURDON, B, ,**

Mailing Address C/O BESSEMER TRUST  
630 5TH AVE

City  
NEW YORK

State  
NY

Zip Code  
10111

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 / D D / Y Y Y Y Y Y  
04 / 08 / 2020

Transaction ID : SA11AI.110992

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEBER, SHIRLEY, , ,**

Mailing Address 7578 CYPRESS AVE

City  
FONTANA

State  
CA

Zip Code  
92336

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 ▼

426.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 14 / 2020

Transaction ID : SA11AI.111029

Amount of Each Receipt this Period

10.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1510.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WEBER, SHIRLEY, , ,

Mailing Address 7578 CYPRESS AVE

City  
FONTANAState  
CAZip Code  
92336FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 28 / 2020

Transaction ID : SA11AI.111030

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEBER, SHIRLEY, , ,

Mailing Address 7578 CYPRESS AVE

City  
FONTANAState  
CAZip Code  
92336FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

611.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 28 / 2020

Transaction ID : SA11AI.111031

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WELCHFALZONE, MARY, , ,

Mailing Address 61-25 FLUSHING AVE  
#3RCity  
MASPETHState  
NYZip Code  
11378FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 25 / 2020

Transaction ID : SA11AI.111080

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

335.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WHITESIDE, BRET, , ,

Mailing Address 3048 VALLEY OF HEARTS DELIGHT PL

City  
SAN JOSE

State  
CA

Zip Code  
95136

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
ENGINEERING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.111169

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILKINSON, JOHN, , ,

Mailing Address 5789 CESSNA DR

City  
MONTGOMERY

State  
TX

Zip Code  
77316

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 ▼

281.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.111227

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, ANDROMEDA, , ,

Mailing Address 8954 WINGED BOURNE

City  
CHARLOTTE

State  
NC

Zip Code  
28210

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 / D D / Y Y Y Y Y Y  
04 / 22 / 2020

Transaction ID : SA11AI.111241

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

1200.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WIMER, WILLIAM, , ,

Mailing Address 11 DOE RUN LN

City  
LANCASTER

State  
PA

Zip Code  
17603

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.111312

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WOLFF, NANCY, , ,

Mailing Address 3407 PRINCEWOOD CT

City  
ARLINGTON

State  
TX

Zip Code  
76016

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UT ARLINGTON

Occupation (for Individual)  
MATH ADJUNCT PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 19 / 2020

Transaction ID : SA11AI.111372

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WOODBURY, ROGER, , ,

Mailing Address 38401 S SKYLINE DR

City  
SADDLEBROOKE

State  
AZ

Zip Code  
85789

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 05 / 2020

Transaction ID : SA11AI.111394

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

250.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOODBURY, ROGER, , ,**

Mailing Address 38401 S SKYLINE DR

City  
SADDLEBROOKE

State  
AZ

Zip Code  
85789

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 14 / 2020

Transaction ID : SA11AI.111395

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOODHOUSE, MARILYN, , ,**

Mailing Address 650 RAMBLEWOOD RD

City  
HOUSTON

State  
TX

Zip Code  
77079

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 ▼

1850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA11AI.111407

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. YOUNG, HOWARD, , ,**

Mailing Address 40 SEASON LN

City  
SELMA

State  
NC

Zip Code  
27576

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 06 / 2020

Transaction ID : SA11AI.111540

Amount of Each Receipt this Period

120.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

420.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ZACHA, ROBIN, , ,**

Mailing Address 6605 W 80TH ST

City  
LOS ANGELES

State  
CA

Zip Code  
90045

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.111560

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ZACHA, ROBIN, , ,**

Mailing Address 6605 W 80TH ST

City  
LOS ANGELES

State  
CA

Zip Code  
90045

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11AI.111561

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ZINN, DAVID, , ,**

Mailing Address 720 E 6TH ST

City  
ANNISTON

State  
AL

Zip Code  
36207

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NEPHROLOGY & HYPERTENSION CONSULTANTS

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 19 / 2020

Transaction ID : SA11AI.111617

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

700.00

1134668.62

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 216 OF 282  
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☐ 11a ☐ 11b ☒ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

### A. IBEW LOCAL 102 PAC

Mailing Address 50 PARSIPPANY RD

City  
PARSIPPANY

State  
NJ

Zip Code  
07054

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 ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA11C.111709

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

### B.

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

### C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

25000.00

25000.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94110

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 ▼

1641.62

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 01 / 2020

Transaction ID : SA15.111666

Amount of Each Receipt this Period

0.35

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94110

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 ▼

1641.97

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 02 / 2020

Transaction ID : SA15.111667

Amount of Each Receipt this Period

0.35

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94110

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 ▼

1642.01

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 03 / 2020

Transaction ID : SA15.111646

Amount of Each Receipt this Period

0.04

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.74

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94110

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 ▼

1642.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 08 / 2020

Transaction ID : SA15.111651

Amount of Each Receipt this Period

0.14

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94110

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 ▼

1642.29

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 08 / 2020

Transaction ID : SA15.111652

Amount of Each Receipt this Period

0.14

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94110

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 ▼

1642.47

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 09 / 2020

Transaction ID : SA15.111656

Amount of Each Receipt this Period

0.18

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.46

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94110

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 ▼

1642.65

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 09 / 2020

Transaction ID : SA15.111657

Amount of Each Receipt this Period

0.18

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94110

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 ▼

1642.83

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 09 / 2020

Transaction ID : SA15.111658

Amount of Each Receipt this Period

0.18

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94110

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 ▼

1643.01

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2020

Transaction ID : SA15.111659

Amount of Each Receipt this Period

0.18

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.54

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. STRIPE**

Mailing Address 3180 18TH STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

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 ▼

1643.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 13 / 2020

Transaction ID : SA15.111668

Amount of Each Receipt this Period

0.35

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. STRIPE**

Mailing Address 3180 18TH STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

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 ▼

1643.71

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 13 / 2020

Transaction ID : SA15.111669

Amount of Each Receipt this Period

0.35

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. STRIPE**

Mailing Address 3180 18TH STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

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 ▼

1644.06

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 14 / 2020

Transaction ID : SA15.111670

Amount of Each Receipt this Period

0.35

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1.05

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. STRIPE**

Mailing Address 3180 18TH STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

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 ▼

1644.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 14 / 2020

Transaction ID : SA15.111671

Amount of Each Receipt this Period

0.35

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. STRIPE**

Mailing Address 3180 18TH STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

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 ▼

1644.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA15.111653

Amount of Each Receipt this Period

0.14

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. STRIPE**

Mailing Address 3180 18TH STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

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 ▼

1644.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 16 / 2020

Transaction ID : SA15.111672

Amount of Each Receipt this Period

0.35

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.84

**TOTAL** This Period (last page this line number only)..... ►

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 222 OF 282

(check only one)

<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRIPE**

Mailing Address 3180 18TH STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1645.25

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		16		2020

Transaction ID : SA15.111673

Amount of Each Receipt this Period

0.35

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STRIPE**

Mailing Address 3180 18TH STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1645.26

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		17		2020

Transaction ID : SA15.111643

Amount of Each Receipt this Period

0.01

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STRIPE**

Mailing Address 3180 18TH STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify)

General

Aggregate Year-to-Date ▼

1645.27

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		17		2020

Transaction ID : SA15.111644

Amount of Each Receipt this Period

0.01

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.37

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 223 OF 282  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. STRIPE**

Mailing Address 3180 18TH STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

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 ▼

1645.41

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 17 / 2020

Transaction ID : SA15.111654

Amount of Each Receipt this Period

0.14

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. STRIPE**

Mailing Address 3180 18TH STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

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 ▼

1654.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 17 / 2020

Transaction ID : SA15.111676

Amount of Each Receipt this Period

9.14

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. STRIPE**

Mailing Address 3180 18TH STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

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 ▼

1654.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 20 / 2020

Transaction ID : SA15.111645

Amount of Each Receipt this Period

0.01

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

9.29

# **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 224 OF 282

<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)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94110

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 ▼

1654.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 20 / 2020

**Transaction ID : SA15.111649**

Amount of Each Receipt this Period

0.08

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94110

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 ▼

1654.89

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 21 / 2020

**Transaction ID : SA15.111663**

Amount of Each Receipt this Period

0.25

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94110

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 ▼

1654.93

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 22 / 2020

**Transaction ID : SA15.111647**

Amount of Each Receipt this Period

0.04

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.37



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 225 OF 282  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. STRIPE**

Mailing Address 3180 18TH STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

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 ▼

1655.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 22 / 2020

Transaction ID : SA15.111660

Amount of Each Receipt this Period

0.18

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. STRIPE**

Mailing Address 3180 18TH STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

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 ▼

1655.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 22 / 2020

Transaction ID : SA15.111664

Amount of Each Receipt this Period

0.25

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. STRIPE**

Mailing Address 3180 18TH STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

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 ▼

1655.61

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 22 / 2020

Transaction ID : SA15.111665

Amount of Each Receipt this Period

0.25

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.68

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 226 OF 282  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. STRIPE**

Mailing Address 3180 18TH STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

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 ▼

1655.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 23 / 2020

Transaction ID : SA15.111655

Amount of Each Receipt this Period

0.14

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. STRIPE**

Mailing Address 3180 18TH STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

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 ▼

1655.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 24 / 2020

Transaction ID : SA15.111648

Amount of Each Receipt this Period

0.07

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. STRIPE**

Mailing Address 3180 18TH STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

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 ▼

1656.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2020

Transaction ID : SA15.111661

Amount of Each Receipt this Period

0.18

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.39

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 227 OF 282

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94110

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 ▼

1657.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2020

Transaction ID : SA15.111674

Amount of Each Receipt this Period

1.75

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94110

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 ▼

1659.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2020

Transaction ID : SA15.111675

Amount of Each Receipt this Period

1.75

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94110

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 ▼

1659.58

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2020

Transaction ID : SA15.111650

Amount of Each Receipt this Period

0.08

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3.58

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 228 OF 282  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94110

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 ▼

1659.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA15.111662

Amount of Each Receipt this Period

0.18

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.**

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.18

18.49

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 229 OF 282  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. CHAIN BRIDGE BANK**

Mailing Address 1445-A LAUGHLIN AVE

City  
MCLEAN

State  
VA

Zip Code  
22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33651.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA17.98443

Amount of Each Receipt this Period

0.18

☐ Memo Item  
INTEREST

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. CHAIN BRIDGE BANK**

Mailing Address 1445-A LAUGHLIN AVE

City  
MCLEAN

State  
VA

Zip Code  
22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33779.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2020

Transaction ID : SA17.98444

Amount of Each Receipt this Period

127.60

☐ Memo Item  
INTEREST

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

127.78

127.78

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 230 OF 282

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. 1ST BANKCARD**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		03		2020

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING  
P.O. BOX 2818**City  
OMAHAState  
NEZip Code  
68103-2818Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Category/  
Type

FEC Identification Number

**C****Transaction ID : SB21B.98340**

Amount of Each Disbursement this Period

14149.49

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. 1ST BANKCARD**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		28		2020

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING  
P.O. BOX 2818**City  
OMAHAState  
NEZip Code  
68103-2818Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Category/  
Type

FEC Identification Number

**C****Transaction ID : SB21B.98341**

Amount of Each Disbursement this Period

130.67

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. 1ST BANKCARD**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		28		2020

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING  
P.O. BOX 2818**City  
OMAHAState  
NEZip Code  
68103-2818Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Category/  
Type

FEC Identification Number

**C****Transaction ID : SB21B.98342**

Amount of Each Disbursement this Period

467.00

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

14747.16

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 231 OF 282

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. ADVANTAGE INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		13		2020

Mailing Address 1421 PRINCE STREET, SUITE 220

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
1ST BANKCARD PMT [SB21B.98342]: SMS/TEXTING SERVICES

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	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

Transaction ID : SB21B.11170

Amount of Each Disbursement this Period

467.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICA FIRST POLICIES, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2020

Mailing Address 1400 CRYSTAL DRIVE  
STE 850City  
ARLINGTONState  
VAZip Code  
22202Purpose of Disbursement  
IN-KIND - PAYROLL / OFFICE EXPENSES

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	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

Transaction ID : SB21B.11171

Amount of Each Disbursement this Period

86420.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN AIRLINES**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		11		2020

Mailing Address 4333 AMON CARTER BLVD

City  
FORT WORTHState  
TXZip Code  
76155Purpose of Disbursement  
REIMBURSEMENT [SB21B.98344]: TRAVEL: AIR

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	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

Transaction ID : SB21B.11168

Amount of Each Disbursement this Period

77.05

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

86420.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD

City  
FORT WORTHState  
TXZip Code  
76155Purpose of Disbursement  
REIMBURSEMENT [SB21B.98344]:TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	3			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.11168**

Amount of Each Disbursement this Period

38.52

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD

City  
FORT WORTHState  
TXZip Code  
76155Purpose of Disbursement  
REIMBURSEMENT [SB21B.98344]:TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	3			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.11168**

Amount of Each Disbursement this Period

995.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. BASSWOOD RESEARCH**Mailing Address AIR RIGHTS CENTER, NORTH TOWER  
4550 MONTGOMERY AVECity  
BETHESDAState  
MDZip Code  
20814Purpose of Disbursement  
POLLING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	3			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.98330**

Amount of Each Disbursement this Period

53843.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

53843.50



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. CAPITAL RESEARCH GROUP, LLC**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	1			2	0	2	0		

Mailing Address 1220 L STREET NW  
SUITE 100-467City  
WASHINGTONState  
DCZip Code  
20005Purpose of Disbursement  
RESEARCH CONSULTING

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21B.98331**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CLOUDFARE**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	8			2	0	2	0		

Mailing Address 101 TOWNSEND ST

City  
SAN FRANCISCOState  
CAZip Code  
94107Purpose of Disbursement  
1ST BANKCARD PMT [SB21B.98341]: SOFTWARE SUBSCRIPTION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21B.11170**

Amount of Each Disbursement this Period

40.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. CLOUDFARE**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	0			2	0	2	0		

Mailing Address 101 TOWNSEND ST

City  
SAN FRANCISCOState  
CAZip Code  
94107Purpose of Disbursement  
1ST BANKCARD PMT [SB21B.98341]: SOFTWARE SUBSCRIPTION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21B.11170**

Amount of Each Disbursement this Period

12.67

☒ 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 PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. CONVERT DIGITAL**Mailing Address 45 NORTH HILL DR.  
SUITE 100City  
WARRENTONState  
VAZip Code  
20186Purpose of Disbursement  
DIGITAL FUNDRAISING

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	4			0	9			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.98345**

Amount of Each Disbursement this Period

41495.63

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CONVERT DIGITAL**Mailing Address 45 NORTH HILL DR.  
SUITE 100City  
WARRENTONState  
VAZip Code  
20186Purpose of Disbursement  
DIGITAL FUNDRAISING

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	4			1	0			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.98346**

Amount of Each Disbursement this Period

110000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CORTES, STEVEN, C, ,**

Mailing Address 3717 N HERMITAGE

City  
CHICAGOState  
ILZip Code  
60613Purpose of Disbursement  
COMMUNICATIONS CONSULTING

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	4			2	2			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.98361**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

158995.63

**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 PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. DANIEL K. HAGOOD, P.C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		03		2020

Mailing Address 1801 S 2ND ST

City  
MCALLENState  
TXZip Code  
78503Purpose of Disbursement  
LEGAL CONSULTING

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB21B.98348**

Amount of Each Disbursement this Period

230461.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DANIEL K. HAGOOD, P.C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		16		2020

Mailing Address 1801 S 2ND ST

City  
MCALLENState  
TXZip Code  
78503Purpose of Disbursement  
LEGAL CONSULTING

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB21B.98349**

Amount of Each Disbursement this Period

23870.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DEL RAY MEDIA LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		14		2020

Mailing Address 1427 LESLIE AVE

City  
ALEXANDRIAState  
VAZip Code  
22301Purpose of Disbursement  
DATA ANALYSIS CONSULTING

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB21B.98343**

Amount of Each Disbursement this Period

50000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

304331.51

**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 PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. FORMSTACK, LLC**Mailing Address 11671 LANTERN RD  
#300City  
FISHERSState  
INZip Code  
46038Purpose of Disbursement  
1ST BANKCARD PMT [SB21B.98340]: SOFTWARE SUBSCRIPTION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.11170**

Amount of Each Disbursement this Period

59.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. FOUR SEASONS HOTEL**

Mailing Address 2800 S OCEAN BLVD

City  
PALM BEACHState  
FLZip Code  
33480Purpose of Disbursement  
REIMBURSEMENT [SB21B.98344]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	0			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.11168**

Amount of Each Disbursement this Period

1925.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. FOUR SEASONS HOTEL**

Mailing Address 2800 S OCEAN BLVD

City  
PALM BEACHState  
FLZip Code  
33480Purpose of Disbursement  
REIMBURSEMENT [SB21B.98344]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	0			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.11168**

Amount of Each Disbursement this Period

1925.00

☒ 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	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 237 OF 282

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. INTERCONTINENTAL BARCLAY HOTEL**

Mailing Address 111 EAST 48TH STREET

City  
NEW YORKState  
NYZip Code  
10017Purpose of Disbursement  
1ST BANKCARD PMT [SB21B.98340]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		30		2020

FEC Identification Number

**C****Transaction ID : SB21B.11170**

Amount of Each Disbursement this Period

14090.49

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. JONES DAY**Mailing Address PO BOX 7805  
BEN FRANKLIN STATIONCity  
WASHINGTONState  
DCZip Code  
20044Purpose of Disbursement  
LEGAL CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2020

FEC Identification Number

**C****Transaction ID : SB21B.98332**

Amount of Each Disbursement this Period

177513.09

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JONES DAY**Mailing Address PO BOX 7805  
BEN FRANKLIN STATIONCity  
WASHINGTONState  
DCZip Code  
20044Purpose of Disbursement  
LEGAL CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2020

FEC Identification Number

**C****Transaction ID : SB21B.98333**

Amount of Each Disbursement this Period

145600.81

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

323113.90

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. KASOWITZ BENSON TORRES LLP**

Mailing Address 1633 BROADWAY

City  
NEW YORKState  
NYZip Code  
10019Purpose of Disbursement  
LEGAL CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	1			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.98352**

Amount of Each Disbursement this Period

173447.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KASOWITZ BENSON TORRES LLP**

Mailing Address 1633 BROADWAY

City  
NEW YORKState  
NYZip Code  
10019Purpose of Disbursement  
LEGAL CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	2			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.98353**

Amount of Each Disbursement this Period

94798.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KASOWITZ BENSON TORRES LLP**

Mailing Address 1633 BROADWAY

City  
NEW YORKState  
NYZip Code  
10019Purpose of Disbursement  
LEGAL CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	9			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.98354**

Amount of Each Disbursement this Period

141429.88

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

409675.77

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 239 OF 282

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. LYFT**Mailing Address 185 BERRY ST  
SUITE 5000City  
SAN FRANCISCOState  
CAZip Code  
94107Purpose of Disbursement  
REIMBURSEMENT [SB21B.76921]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				1	0		2	0	2	0		

FEC Identification Number

**C** **Transaction ID : SB21B.11169**

Amount of Each Disbursement this Period

 23.55☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. LYFT**Mailing Address 185 BERRY ST  
SUITE 5000City  
SAN FRANCISCOState  
CAZip Code  
94107Purpose of Disbursement  
REIMBURSEMENT [SB21B.76921]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				1	0		2	0	2	0		

FEC Identification Number

**C** **Transaction ID : SB21B.11169**

Amount of Each Disbursement this Period

 14.87☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. M&B ANALYTICS**

Mailing Address P.O. BOX 2583

City  
ALEXANDRIAState  
VAZip Code  
22301Purpose of Disbursement  
DATA AND ANALYTICS CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				0	2		2	0	2	0		

FEC Identification Number

**C** **Transaction ID : SB21B.9835**

Amount of Each Disbursement this Period

 5000.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶ 5000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. MCMAHON, LINDA, E, ,**

Mailing Address 1055 WASHINGTON BLVD.

City  
STAMFORDState  
CTZip Code  
06901Purpose of Disbursement  
IN-KIND - TRAVEL: AIR

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			3	0			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.11171**

Amount of Each Disbursement this Period

152436.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MINTZ, LEVIN, COHN, FERRIS, GLOVSKY AND POPEO, P.C**

Mailing Address 666 THIRD AVENUE

City  
NEW YORKState  
NYZip Code  
10017Purpose of Disbursement  
LEGAL CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	6			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.98356**

Amount of Each Disbursement this Period

54160.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MOLOLAMKEN LLP**

Mailing Address 430 PARK AVE

City  
NEW YORKState  
NYZip Code  
10022Purpose of Disbursement  
LEGAL CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	1			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.98357**

Amount of Each Disbursement this Period

154250.08

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

360846.48



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. MOLOLAMKEN LLP**

Mailing Address 430 PARK AVE

City  
NEW YORKState  
NYZip Code  
10022Purpose of Disbursement  
LEGAL CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	6			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.98358**

Amount of Each Disbursement this Period

40508.88

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. OMNI MANDALAY HOTEL**

Mailing Address 221 LAS COLINAS BLVD E

City  
IRVINGState  
TXZip Code  
75039Purpose of Disbursement  
REIMBURSEMENT [SB21B.98350]:TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	4			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.11169**

Amount of Each Disbursement this Period

388.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. ONMESSAGE INC.**Mailing Address 705 MELVIN AVE  
#105City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
RESEARCH CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	2			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.98358**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

48008.88

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. ONMESSAGE INC.**Mailing Address 705 MELVIN AVE  
#105City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
POLLING EXPENSE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	6			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.98336**

Amount of Each Disbursement this Period

60302.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. OPINION INSIGHT, LLC**

Mailing Address 18 VILLAGE COURT

City  
HAZLETState  
NJZip Code  
07730Purpose of Disbursement  
POLLING EXPENSE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	3			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.98334**

Amount of Each Disbursement this Period

81620.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. REVV LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
1ST BANKCARD PMT [SB21B.98341]: MERCHANT FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	2			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.1117**

Amount of Each Disbursement this Period

49.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

141922.50

**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 PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. SHUTTERSTOCK**Mailing Address 350 FIFTH AVE  
21ST FLOORCity  
NEW YORKState  
NYZip Code  
10118Purpose of Disbursement  
1ST BANKCARD PMT [SB21B.98341]: IMAGE RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	5			2	0	2	0		

FEC Identification Number

**C** **Transaction ID : SB21B.11170**

Amount of Each Disbursement this Period

 29.00☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIBLING, GRAYSON, , ,**

Mailing Address 1400 CRYSTAL DRIVE SUITE 850

City  
ARLINGTONState  
VAZip Code  
22020Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	1			2	0	2	0		

FEC Identification Number

**C** **Transaction ID : SB21B.98350**

Amount of Each Disbursement this Period

 610.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	1			2	0	2	0		

FEC Identification Number

**C** **Transaction ID : SB21B.98361**

Amount of Each Disbursement this Period

 2474.85☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 3084.85

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		02		2020

FEC Identification Number

**C****Transaction ID : SB21B.98362**

Amount of Each Disbursement this Period

402.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		03		2020

FEC Identification Number

**C****Transaction ID : SB21B.98363**

Amount of Each Disbursement this Period

593.02

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		06		2020

FEC Identification Number

**C****Transaction ID : SB21B.98364**

Amount of Each Disbursement this Period

360.93

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1356.23

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
0	4		0	7		2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.98365**

Amount of Each Disbursement this Period

347.97

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
0	4		0	8		2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.98366**

Amount of Each Disbursement this Period

895.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
0	4		0	9		2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.98367**

Amount of Each Disbursement this Period

1165.10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2408.51

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	0			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.98368**

Amount of Each Disbursement this Period

455.59

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	3			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.98369**

Amount of Each Disbursement this Period

414.88

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	4			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.98371**

Amount of Each Disbursement this Period

531.63

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1402.10

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	5			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.98371**

Amount of Each Disbursement this Period

1213.97

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	6			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.98372**

Amount of Each Disbursement this Period

329.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	7			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.98373**

Amount of Each Disbursement this Period

313.86

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1857.35

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 248 OF 282

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		20		2020

FEC Identification Number

**C****Transaction ID : SB21B.98374**

Amount of Each Disbursement this Period

591.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		21		2020

FEC Identification Number

**C****Transaction ID : SB21B.98375**

Amount of Each Disbursement this Period

439.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		22		2020

FEC Identification Number

**C****Transaction ID : SB21B.98376**

Amount of Each Disbursement this Period

2653.36

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3684.70



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 249 OF 282

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		23		2020

FEC Identification Number

**C****Transaction ID : SB21B.98377**

Amount of Each Disbursement this Period

1076.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2020

FEC Identification Number

**C****Transaction ID : SB21B.98378**

Amount of Each Disbursement this Period

721.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		27		2020

FEC Identification Number

**C****Transaction ID : SB21B.98379**

Amount of Each Disbursement this Period

843.53

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2641.28

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		28		2020

FEC Identification Number

**C****Transaction ID : SB21B.98380**

Amount of Each Disbursement this Period

398.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		29		2020

FEC Identification Number

**C****Transaction ID : SB21B.98381**

Amount of Each Disbursement this Period

1804.36

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCOState  
CAZip Code  
94110Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2020

FEC Identification Number

**C****Transaction ID : SB21B.98382**

Amount of Each Disbursement this Period

527.71

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2730.35

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. TARGETED VICTORY, LLC**Mailing Address 2311 WILSON BLVD  
SUITE 200City  
ARLINGTONState  
VAZip Code  
22201Purpose of Disbursement  
ONLINE ADVERTISING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		03		2020

FEC Identification Number

**C****Transaction ID : SB21B.98335**

Amount of Each Disbursement this Period

30083.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TARGETED VICTORY, LLC**Mailing Address 2311 WILSON BLVD  
SUITE 200City  
ARLINGTONState  
VAZip Code  
22201Purpose of Disbursement  
ONLINE ADVERTISING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		03		2020

FEC Identification Number

**C****Transaction ID : SB21B.98338**

Amount of Each Disbursement this Period

80000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TARGETED VICTORY, LLC**Mailing Address 2311 WILSON BLVD  
SUITE 200City  
ARLINGTONState  
VAZip Code  
22201Purpose of Disbursement  
ONLINE ADVERTISING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		03		2020

FEC Identification Number

**C****Transaction ID : SB21B.98335**

Amount of Each Disbursement this Period

61869.84

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

171953.83

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. TARGETED VICTORY, LLC**Mailing Address 2311 WILSON BLVD  
SUITE 200City  
ARLINGTONState  
VAZip Code  
22201Purpose of Disbursement  
ONLINE ADVERTISING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		08		2020

FEC Identification Number

**C****Transaction ID : SB21B.98337**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TARGETED VICTORY, LLC**Mailing Address 2311 WILSON BLVD  
SUITE 200City  
ARLINGTONState  
VAZip Code  
22201Purpose of Disbursement  
ONLINE ADVERTISING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		10		2020

FEC Identification Number

**C****Transaction ID : SB21B.98383**

Amount of Each Disbursement this Period

10750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TARGETED VICTORY, LLC**Mailing Address 2311 WILSON BLVD  
SUITE 200City  
ARLINGTONState  
VAZip Code  
22201Purpose of Disbursement  
ONLINE ADVERTISING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		13		2020

FEC Identification Number

**C****Transaction ID : SB21B.98384**

Amount of Each Disbursement this Period

18317.58

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

36567.58

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 253 OF 282

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. TARGETED VICTORY, LLC**Mailing Address 2311 WILSON BLVD  
SUITE 200City  
ARLINGTONState  
VAZip Code  
22201Purpose of Disbursement  
ONLINE ADVERTISING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.98385**

Amount of Each Disbursement this Period

139773.36

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. THE COEFFICIENT GROUP**Mailing Address 1881 MAIN ST  
#305City  
KANSAS CITYState  
MOZip Code  
64108Purpose of Disbursement  
POLLING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	5			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.98387**

Amount of Each Disbursement this Period

10500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER**Mailing Address 1455 MARKET ST  
STE 400City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
REIMBURSEMENT [SB21B.98350]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	6			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.11168**

Amount of Each Disbursement this Period

39.98

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

150273.36

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 254 OF 282

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. UBER**Mailing Address 1455 MARKET ST  
STE 400City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
REIMBURSEMENT [SB21B.98350]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	6			2	0	2	0		

FEC Identification Number

C

**Transaction ID : SB21B.11168**

Amount of Each Disbursement this Period

7.34

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER**Mailing Address 1455 MARKET ST  
STE 400City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
REIMBURSEMENT [SB21B.98344]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	7			2	0	2	0		

FEC Identification Number

C

**Transaction ID : SB21B.11167**

Amount of Each Disbursement this Period

41.37

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER**Mailing Address 1455 MARKET ST  
STE 400City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
REIMBURSEMENT [SB21B.98350]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	7			2	0	2	0		

FEC Identification Number

C

**Transaction ID : SB21B.11168**

Amount of Each Disbursement this Period

8.90

☒ 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 PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. UBER**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2020

Mailing Address 1455 MARKET ST  
STE 400City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
REIMBURSEMENT [SB21B.98350]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.11169

Amount of Each Disbursement this Period

17.71

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		09		2020

Mailing Address 1455 MARKET ST  
STE 400City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
REIMBURSEMENT [SB21B.98344]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.11167

Amount of Each Disbursement this Period

40.22

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		09		2020

Mailing Address 1455 MARKET ST  
STE 400City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
REIMBURSEMENT [SB21B.98344]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.11167

Amount of Each Disbursement this Period

27.94

☒ 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 PageFOR LINE NUMBER:  
(check only one)

PAGE 256 OF 282

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. UBER**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	9			2	0	2	0		

Mailing Address 1455 MARKET ST  
STE 400City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
REIMBURSEMENT [SB21B.98344]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21B.11168**

Amount of Each Disbursement this Period

10.25

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	0			2	0	2	0		

Mailing Address 1455 MARKET ST  
STE 400City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
REIMBURSEMENT [SB21B.98350]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21B.11169**

Amount of Each Disbursement this Period

14.78

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	0			2	0	2	0		

Mailing Address 1455 MARKET ST  
STE 400City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
REIMBURSEMENT [SB21B.98350]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21B.11166**

Amount of Each Disbursement this Period

16.17

☒ 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 PageFOR LINE NUMBER:  
(check only one)

PAGE 257 OF 282

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. UBER**Mailing Address 1455 MARKET ST  
STE 400City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
REIMBURSEMENT [SB21B.98350]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	2			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.11169**

Amount of Each Disbursement this Period

17.06

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER**Mailing Address 1455 MARKET ST  
STE 400City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
REIMBURSEMENT [SB21B.98350]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	2			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.11169**

Amount of Each Disbursement this Period

19.81

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. VIRGINIA DEPARTMENT OF TAXATION**

Mailing Address PO BOX 1777

City  
RICHMONDState  
VAZip Code  
23218Purpose of Disbursement  
TAXES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	0			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.98388**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. WALSH, BRIAN, , ,**

Mailing Address 1400 CRYSTAL DRIVE SUITE 850

City  
ARLINGTONState  
VAZip Code  
22020Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		07		2020

FEC Identification Number

**C****Transaction ID : SB21B.98344**

Amount of Each Disbursement this Period

5091.66

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WILEY REIN LLP**

Mailing Address 1776 K STREET NW

City  
WASHINGTONState  
DCZip Code  
20006Purpose of Disbursement  
LEGAL CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		27		2020

FEC Identification Number

**C****Transaction ID : SB21B.98390**

Amount of Each Disbursement this Period

18467.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. XACT DATA DISCOVERY**Mailing Address 5800 FOXRIDGE DR  
STE 406City  
MISSIONState  
KSZip Code  
66202Purpose of Disbursement  
DATA ANALYSIS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		29		2020

FEC Identification Number

**C****Transaction ID : SB21B.98391**

Amount of Each Disbursement this Period

1950.05

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

25509.21

**TOTAL** This Period (last page this line number only).....▶

2320374.68

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 259 OF 282

<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)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. COLEMAN, JAMES, , ,**

Mailing Address P.O. BOX 864

City  
FLAT ROCKState  
NCZip Code  
28731Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		15		2020

FEC Identification Number

**C****Transaction ID : SB28A.98392**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DOANE, DARYL, , ,**

Mailing Address 1300 HOLLYDALE DR

City  
FULLERTONState  
CAZip Code  
92831Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		12		2020

FEC Identification Number

**C****Transaction ID : SB28A.98393**

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DOANE, DARYL, , ,**

Mailing Address 1300 HOLLYDALE DR

City  
FULLERTONState  
CAZip Code  
92831Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		12		2020

FEC Identification Number

**C****Transaction ID : SB28A.98397**

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

850.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 260 OF 282

<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)

**AMERICA FIRST ACTION, INC.**

Full Name (Last, First, Middle Initial)

**A. DOANE, DARYL, , ,**

Mailing Address 1300 HOLLYDALE DR

City  
FULLERTONState  
CAZip Code  
92831Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2020

FEC Identification Number

**C****Transaction ID : SB28A.98398**

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MURRAY, MICHAEL, , ,**

Mailing Address 1433 ROSELAWN AVE W

City  
ROSEVILLEState  
MNZip Code  
55113Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2020

FEC Identification Number

**C****Transaction ID : SB28A.98395**

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

350.00

1200.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 261 OF 282

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**BASSWOOD RESEARCH**Nature of Debt (Purpose):  
POLLING EXPENSEMailing Address AIR RIGHTS CENTER, NORTH TOWER  
4550 MONTGOMERY AVECity  
BETHESDAState  
MDZip Code  
20814

Outstanding Balance Beginning This Period

53843.50

Transaction ID : SD10.98215

Amount Incurred This Period

0.00

Payment This Period

53843.50

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**CAPITAL RESEARCH GROUP, LLC**Nature of Debt (Purpose):  
RESEARCH CONSULTINGMailing Address 1220 L STREET NW  
SUITE 100-467City  
WASHINGTONState  
DCZip Code  
20005

Outstanding Balance Beginning This Period

7500.00

Transaction ID : SD10.98221

Amount Incurred This Period

0.00

Payment This Period

7500.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**CAPITAL RESEARCH GROUP, LLC**Nature of Debt (Purpose):  
RESEARCH CONSULTINGMailing Address 1220 L STREET NW  
SUITE 100-467City  
WASHINGTONState  
DCZip Code  
20005

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.111768

Amount Incurred This Period

7500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7500.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

7500.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 262 OF 282

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

JONES DAY

Nature of Debt (Purpose):  
LEGAL CONSULTINGMailing Address PO BOX 7805  
BEN FRANKLIN STATIONCity  
WASHINGTONState  
DCZip Code  
20044

Outstanding Balance Beginning This Period

177513.09

Transaction ID : SD10.98214

Amount Incurred This Period

0.00

Payment This Period

177513.09

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

JONES DAY

Nature of Debt (Purpose):  
LEGAL CONSULTINGMailing Address PO BOX 7805  
BEN FRANKLIN STATIONCity  
WASHINGTONState  
DCZip Code  
20044

Outstanding Balance Beginning This Period

145600.81

Transaction ID : SD10.98242

Amount Incurred This Period

0.00

Payment This Period

145600.81

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

JONES DAY

Nature of Debt (Purpose):  
LEGAL CONSULTINGMailing Address PO BOX 7805  
BEN FRANKLIN STATIONCity  
WASHINGTONState  
DCZip Code  
20044

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.111715

Amount Incurred This Period

37031.25

Payment This Period

0.00

Outstanding Balance at Close of This Period

37031.25

1) **SUBTOTALS** This Period This Page (optional)..... ►

37031.25

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 263 OF 282

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

JONES DAY

Nature of Debt (Purpose):  
LEGAL CONSULTINGMailing Address PO BOX 7805  
BEN FRANKLIN STATIONCity  
WASHINGTONState  
DCZip Code  
20044

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.111716

Amount Incurred This Period

275.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

275.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

JONES DAY

Nature of Debt (Purpose):  
LEGAL CONSULTINGMailing Address PO BOX 7805  
BEN FRANKLIN STATIONCity  
WASHINGTONState  
DCZip Code  
20044

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.111717

Amount Incurred This Period

25530.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

25530.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

JONES DAY

Nature of Debt (Purpose):  
LEGAL CONSULTINGMailing Address PO BOX 7805  
BEN FRANKLIN STATIONCity  
WASHINGTONState  
DCZip Code  
20044

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.111718

Amount Incurred This Period

101082.79

Payment This Period

0.00

Outstanding Balance at Close of This Period

101082.79

1) SUBTOTALS This Period This Page (optional)..... ►

126887.79

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 264 OF 282

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

MINTZ, LEVIN, COHN, FERRIS, GLOVSKY AND POPEO, P.C

Nature of Debt (Purpose):  
LEGAL CONSULTING

Mailing Address 666 THIRD AVENUE

City  
NEW YORKState  
NYZip Code  
10017

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.111719

Amount Incurred This Period

66009.60

Payment This Period

0.00

Outstanding Balance at Close of This Period

66009.60

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ONMESSAGE INC.

Nature of Debt (Purpose):  
POLLING EXPENSEMailing Address 705 MELVIN AVE  
#105City  
ANNAPOLISState  
MDZip Code  
21401

Outstanding Balance Beginning This Period

60302.50

Transaction ID : SD10.98217

Amount Incurred This Period

0.00

Payment This Period

60302.50

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

OPINION INSIGHT, LLC

Nature of Debt (Purpose):  
POLLING EXPENSE

Mailing Address 18 VILLAGE COURT

City  
HAZLETState  
NJZip Code  
07730

Outstanding Balance Beginning This Period

81620.00

Transaction ID : SD10.98216

Amount Incurred This Period

0.00

Payment This Period

81620.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

66009.60

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►



**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 265 OF 282

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

TARGETED VICTORY, LLC

Nature of Debt (Purpose):  
DIGITAL FUNDRAISINGMailing Address 2311 WILSON BLVD  
SUITE 200City  
ARLINGTONState  
VAZip Code  
22201

Outstanding Balance Beginning This Period

30083.99

Transaction ID : SD10.98218

Amount Incurred This Period

0.00

Payment This Period

30083.99

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

TARGETED VICTORY, LLC

Nature of Debt (Purpose):  
DIGITAL ADVERTISINGMailing Address 2311 WILSON BLVD  
SUITE 200City  
ARLINGTONState  
VAZip Code  
22201

Outstanding Balance Beginning This Period

80000.00

Transaction ID : SD10.98219

Amount Incurred This Period

0.00

Payment This Period

80000.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

TARGETED VICTORY, LLC

Nature of Debt (Purpose):  
DIGITAL FUNDRAISINGMailing Address 2311 WILSON BLVD  
SUITE 200City  
ARLINGTONState  
VAZip Code  
22201

Outstanding Balance Beginning This Period

61869.84

Transaction ID : SD10.98220

Amount Incurred This Period

0.00

Payment This Period

61869.84

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)..... ►

0.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 266 OF 282

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

TARGETED VICTORY, LLC

Nature of Debt (Purpose):  
DIGITAL CONSULTINGMailing Address 2311 WILSON BLVD  
SUITE 200City  
ARLINGTONState  
VAZip Code  
22201

Outstanding Balance Beginning This Period

7500.00

Transaction ID : SD10.98222

Amount Incurred This Period

0.00

Payment This Period

7500.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

TARGETED VICTORY, LLC

Nature of Debt (Purpose):  
DIGITAL FUNDRAISINGMailing Address 2311 WILSON BLVD  
SUITE 200City  
ARLINGTONState  
VAZip Code  
22201

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.111765

Amount Incurred This Period

116927.09

Payment This Period

0.00

Outstanding Balance at Close of This Period

116927.09

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

TARGETED VICTORY, LLC

Nature of Debt (Purpose):  
CREATIVE FEES AND DIGITAL  
CONSULTINGMailing Address 2311 WILSON BLVD  
SUITE 200City  
ARLINGTONState  
VAZip Code  
22201

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.111766

Amount Incurred This Period

10750.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10750.00

1) SUBTOTALS This Period This Page (optional)..... ►

127677.09

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 267 OF 282

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

TARGETED VICTORY, LLC

Nature of Debt (Purpose):  
DIGITAL CONSULTINGMailing Address 2311 WILSON BLVD  
SUITE 200City  
ARLINGTONState  
VAZip Code  
22201

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.111767

Amount Incurred This Period

7500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ►

7500.00

2) TOTALS This Period (last page this line number only)..... ►

372605.73

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

372605.73

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 268 OF 282  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>AMERICA FIRST ACTION, INC.</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 10px;">C</span> <span>C00637512</span> </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span>				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 40%;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>BIG DOG STRATEGIES LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 40%;">Y Y Y Y Y Y</div> </div>		
Mailing Address    141 ELM ST., SUITE 500			Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">392163.85</div>		
City BUFFALO	State NY	Zip Code 14203	<b>Transaction ID : SE.98318</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 40%;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure DIRECT MAIL: PRINTING AND POSTAGE		Category/ Type	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 40%;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: BIDEN, JOSEPH R JR, , ,			<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Support  <input checked="" type="checkbox"/> Oppose         </div> <div>           Office Sought:    <input type="checkbox"/> House    District: _____  <input checked="" type="checkbox"/> President    <input type="checkbox"/> Senate    State: _____         </div> </div>		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>CHECKMATE STRATEGIES, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 40%;">Y Y Y Y Y Y</div> </div>		
Mailing Address    5 BANYAN COURT			Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">10584.98</div>		
City JACKSON	State NJ	Zip Code 08527	<b>Transaction ID : SE.98269</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 40%;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure DIRECT MAIL: PRINTING AND POSTAGE		Category/ Type	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 40%;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: BIDEN, JOSEPH R JR, , ,			<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Support  <input checked="" type="checkbox"/> Oppose         </div> <div>           Office Sought:    <input type="checkbox"/> House    District: _____  <input checked="" type="checkbox"/> President    <input type="checkbox"/> Senate    State: <u>PA</u> </div> </div>		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">402748.83</div>		
<b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b>			<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>		
<b>(c) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature PROCH, JON, , ,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 40%;">Y Y Y Y Y Y</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 269 OF 282  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>AMERICA FIRST ACTION, INC.</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00637512       </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>CHECKMATE STRATEGIES, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>5 BANYAN COURT</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">125904.49</div>	
City <b>JACKSON</b>	State <b>NJ</b>	Zip Code <b>08527</b>	<b>Transaction ID : SE.98270</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure <b>DIRECT MAIL: PRINTING AND POSTAGE</b>		Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>BIDEN, JOSEPH R JR, , ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>PA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1382909.62</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item <b>CHECKMATE STRATEGIES, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>5 BANYAN COURT</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">133526.58</div>	
City <b>JACKSON</b>	State <b>NJ</b>	Zip Code <b>08527</b>	<b>Transaction ID : SE.98279</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure <b>DIRECT MAIL: PRINTING AND POSTAGE</b>		Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>BIDEN, JOSEPH R JR, , ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>PA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1803270.61</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	▶ <div style="border: 1px solid black; padding: 2px; text-align: right;">259431.07</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	▶ <div style="border: 1px solid black; padding: 2px; text-align: right;"></div>
(c) <b>TOTAL</b> Independent Expenditures .....	▶ <div style="border: 1px solid black; padding: 2px; text-align: right;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PROCH, JON, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 270 OF 282  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>AMERICA FIRST ACTION, INC.</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00637512       </div>
--	---

 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>CHECKMATE STRATEGIES, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>5 BANYAN COURT</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">10584.98</div>	
City <b>JACKSON</b>	State <b>NJ</b>	Zip Code <b>08527</b>	<b>Transaction ID : SE.98289</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure <b>DIRECT MAIL: PRINTING AND POSTAGE</b>		Category/ Type <div style="border: 1px solid black; width: 50px; height: 20px; margin-top: 2px;"></div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>BIDEN, JOSEPH R JR, , ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>PA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right; float: right;">1813855.59</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item <b>CHECKMATE STRATEGIES, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>5 BANYAN COURT</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">125904.49</div>	
City <b>JACKSON</b>	State <b>NJ</b>	Zip Code <b>08527</b>	<b>Transaction ID : SE.98310</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure <b>DIRECT MAIL: PRINTING AND POSTAGE</b>		Category/ Type <div style="border: 1px solid black; width: 50px; height: 20px; margin-top: 2px;"></div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>BIDEN, JOSEPH R JR, , ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>PA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right; float: right;">1939760.08</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">136489.47</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(c) TOTAL</b> Independent Expenditures .....	▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PROCH, JON, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 271 OF 282  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>AMERICA FIRST ACTION, INC.</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00637512</span> </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span>				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <b>DEL RAY MEDIA LLC</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address <b>1427 LESLIE AVE</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">319945.91</div>		
City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22301</b>	<b>Transaction ID : SE.98245</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure <b>PLACED MEDIA: TV</b>		Category/Type <div style="border: 1px solid black; padding: 2px;"></div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: <b>BIDEN, JOSEPH R JR, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">319945.91</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>DEL RAY MEDIA LLC</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address <b>1427 LESLIE AVE</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">408891.11</div>		
City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22301</b>	<b>Transaction ID : SE.98249</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure <b>PLACED MEDIA: TV</b>		Category/Type <div style="border: 1px solid black; padding: 2px;"></div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: <b>BIDEN, JOSEPH R JR, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">728837.02</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;">728837.02</div>		
<b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>		
<b>(c) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <b>PROCH, JON, , ,</b>		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 272 OF 282  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>AMERICA FIRST ACTION, INC.</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00637512       </div>
--	---

 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>DEL RAY MEDIA LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1427 LESLIE AVE</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">942998.48</div>	
City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22301</b>	<b>Transaction ID : SE.98259</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure <b>PLACED MEDIA: TV</b>			Category/Type <div style="border: 1px solid black; padding: 2px; width: 50px;"></div>	
Name of Federal Candidate: <b>BIDEN, JOSEPH R JR, , ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>PA</b>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; text-align: right;">942998.48</div>				

Full Name of Payee <input type="checkbox"/> Memo Item <b>DEL RAY MEDIA LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1427 LESLIE AVE</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">97771.88</div>	
City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22301</b>	<b>Transaction ID : SE.98275</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure <b>PLACED MEDIA: TV</b>			Category/Type <div style="border: 1px solid black; padding: 2px; width: 50px;"></div>	
Name of Federal Candidate: <b>BIDEN, JOSEPH R JR, , ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; text-align: right;">1212414.55</div>				

(a) SUBTOTAL of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;">1040770.36</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PROCH, JON, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 273 OF 282  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>AMERICA FIRST ACTION, INC.</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00637512       </div>
--	---

 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>DEL RAY MEDIA LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1427 LESLIE AVE</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">286834.41</div>	
City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22301</b>	<b>Transaction ID : SE.98285</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure <b>PLACED MEDIA: TV</b>			Category/Type <div style="border: 1px solid black; padding: 2px; width: 50px;"></div>	
Name of Federal Candidate: <b>BIDEN, JOSEPH R JR, , ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>PA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1669744.03</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item <b>DEL RAY MEDIA LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1427 LESLIE AVE</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">145486.64</div>	
City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22301</b>	<b>Transaction ID : SE.98274</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure <b>PLACED MEDIA: TV</b>			Category/Type <div style="border: 1px solid black; padding: 2px; width: 50px;"></div>	
Name of Federal Candidate: <b>BIDEN, JOSEPH R JR, , ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1357901.19</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;">432321.05</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) <b>TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PROCH, JON, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 274 OF 282  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>AMERICA FIRST ACTION, INC.</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00637512         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>DEL RAY MEDIA LLC</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1427 LESLIE AVE</b>				Amount <div style="border: 1px solid black; padding: 2px; font-size: small;">           76028.25         </div>	
City <b>ALEXANDRIA</b>		State <b>VA</b>		Zip Code <b>22301</b>	
Purpose of Expenditure <b>PLACED MEDIA: RADIO</b>				Transaction ID : <b>SE.98304</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>BIDEN, JOSEPH R JR, , ,</b> <div style="float: right;"> <input type="checkbox"/> Support  <input checked="" type="checkbox"/> Oppose         </div>				Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; font-size: small;">1433929.44</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>DEL RAY MEDIA LLC</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1427 LESLIE AVE</b>				Amount <div style="border: 1px solid black; padding: 2px; font-size: small;">           368123.81         </div>	
City <b>ALEXANDRIA</b>		State <b>VA</b>		Zip Code <b>22301</b>	
Purpose of Expenditure <b>PLACED MEDIA: TV</b>				Transaction ID : <b>SE.98295</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>BIDEN, JOSEPH R JR, , ,</b> <div style="float: right;"> <input type="checkbox"/> Support  <input checked="" type="checkbox"/> Oppose         </div>				Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; font-size: small;">1808053.25</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p><b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....</p> <p><b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....</p> <p><b>(c) TOTAL</b> Independent Expenditures .....</p> </div> <div style="width: 35%;"> <div style="border: 1px solid black; padding: 2px; font-size: small; margin-bottom: 10px;">444152.06</div> <div style="border: 1px solid black; padding: 2px; font-size: small; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; font-size: small;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>PROCH, JON, , ,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">M M / D D / Y Y Y Y Y Y</div> </div>	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 275 OF 282  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>AMERICA FIRST ACTION, INC.</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00637512	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>DEL RAY MEDIA LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>1427 LESLIE AVE</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>05 / 01 / 2020</b>		
City <b>ALEXANDRIA</b>		State <b>VA</b>		Zip Code <b>22301</b>	
Purpose of Expenditure <b>PLACED MEDIA: TV</b>			Category/Type <span style="border: 1px solid black; padding: 2px;"></span>		
Amount <b>390872.54</b>			Transaction ID : <b>SE.98296</b>		
Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>04 / 28 / 2020</b>					
Name of Federal Candidate: <b>BIDEN, JOSEPH R JR, , ,</b>				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____					
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"></span> <b>2198925.79</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>DEL RAY MEDIA LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>1427 LESLIE AVE</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>04 / 30 / 2020</b>		
City <b>ALEXANDRIA</b>		State <b>VA</b>		Zip Code <b>22301</b>	
Purpose of Expenditure <b>PLACED MEDIA: TV</b>			Category/Type <span style="border: 1px solid black; padding: 2px;"></span>		
Amount <b>604189.47</b>			Transaction ID : <b>SE.98294</b>		
Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>04 / 29 / 2020</b>					
Name of Federal Candidate: <b>BIDEN, JOSEPH R JR, , ,</b>				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>PA</b>					
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"></span> <b>2543949.55</b>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p><b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....</p> <p><b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....</p> <p><b>(c) TOTAL</b> Independent Expenditures .....</p> </div> <div style="width: 35%; text-align: right;"> <span style="border: 1px solid black; padding: 2px; display: block;">995062.01</span> <span style="border: 1px solid black; padding: 2px; display: block;"></span> <span style="border: 1px solid black; padding: 2px; display: block;"></span> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>PROCH, JON, , ,</u>				Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">05 / 20 / 2020</span>	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 276 OF 282  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>AMERICA FIRST ACTION, INC.</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 10px;">C</span> <span>C00637512</span> </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span>				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>ONMESSAGE INC.</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address <b>705 MELVIN AVE</b> <b>#105</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">20000.00</div>		
City <b>ANNAPOLIS</b>		State <b>MD</b>	Zip Code <b>21401</b>	<b>Transaction ID : SE.98252</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure <b>PRODUCTION COST: VIDEO</b>		Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: <b>BIDEN, JOSEPH R JR, , ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">748837.02</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item <b>ONMESSAGE INC.</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address <b>705 MELVIN AVE</b> <b>#105</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">20000.00</div>		
City <b>ANNAPOLIS</b>		State <b>MD</b>	Zip Code <b>21401</b>	<b>Transaction ID : SE.98300</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure <b>PRODUCTION COST: VIDEO</b>		Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: <b>BIDEN, JOSEPH R JR, , ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">2218925.79</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;">40000.00</div>	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
<b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
<b>(c) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>PROCH, JON, , ,</u>			[Electronically Filed]	Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 278 OF 282  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>AMERICA FIRST ACTION, INC.</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00637512       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input type="checkbox"/> Memo Item <b>SOMETHING ELSE STRATEGIES</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>212 GOLDEN WILLOW COURT</b>			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">           30985.00         </div>	
City <b>EASLEY</b>	State <b>SC</b>	Zip Code <b>29642</b>	<b>Transaction ID : SE.98264</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure <b>PRODUCTION COST: VIDEO</b>			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 50px;"></div>	
Name of Federal Candidate: <b>BIDEN, JOSEPH R JR, , ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>PA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item <b>TARGETED VICTORY, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>2311 WILSON BLVD</b> <b>SUITE 200</b>			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">           116050.00         </div>	
City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22201</b>	<b>Transaction ID : SE.98251</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure <b>DIGITAL ADVERTISING</b>			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 50px;"></div>	
Name of Federal Candidate: <b>BIDEN, JOSEPH R JR, , ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">147035.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div>
(c) <b>TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PROCH, JON, , ,

[Electronically Filed]

Date

M M M /

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Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 279 OF 282  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>AMERICA FIRST ACTION, INC.</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b>    C00637512         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>TARGETED VICTORY, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 2311 WILSON BLVD SUITE 200			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">151276.56</div>		
City ARLINGTON	State VA	Zip Code 22201	<b>Transaction ID : SE.98255</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure DIGITAL ADVERTISING		Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>		
Name of Federal Candidate: BIDEN, JOSEPH R JR, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">1036163.58</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2020		
Full Name of Payee <input type="checkbox"/> Memo Item <b>TARGETED VICTORY, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 2311 WILSON BLVD SUITE 200			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">272436.67</div>		
City ARLINGTON	State VA	Zip Code 22201	<b>Transaction ID : SE.98261</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure DIGITAL ADVERTISING		Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>		
Name of Federal Candidate: BIDEN, JOSEPH R JR, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>PA</u>		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">1215435.15</div>		
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2020		
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">423713.23</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(c) TOTAL</b> Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature PROCH, JON, , ,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">05</div>		<div style="border: 1px solid black; padding: 2px; display: inline-block;">20</div>		<div style="border: 1px solid black; padding: 2px; display: inline-block;">2020</div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 280 OF 282  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>AMERICA FIRST ACTION, INC.</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00637512         </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>TARGETED VICTORY, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 2311 WILSON BLVD SUITE 200			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">6000.00</div>	
City ARLINGTON	State VA	Zip Code 22201	<b>Transaction ID : SE.98290</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure DIGITAL ADVERTISING		Category/ Type	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: BIDEN, JOSEPH R JR, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item <b>TARGETED VICTORY, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 2311 WILSON BLVD SUITE 200			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">151276.56</div>	
City ARLINGTON	State VA	Zip Code 22201	<b>Transaction ID : SE.98302</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure DIGITAL ADVERTISING		Category/ Type	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: BIDEN, JOSEPH R JR, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">157276.56</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PROCH, JON, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 281 OF 282  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>AMERICA FIRST ACTION, INC.</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00637512       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>TARGETED VICTORY, LLC</b>				Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            05 / 01 / 2020         </div>	
Mailing Address 2311 WILSON BLVD SUITE 200				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           302436.67         </div>	
City ARLINGTON		State VA		Zip Code 22201	
Purpose of Expenditure DIGITAL ADVERTISING				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            04 / 30 / 2020         </div>	
Name of Federal Candidate: <input type="checkbox"/> Support BIDEN, JOSEPH R JR, , , <input checked="" type="checkbox"/> Oppose				Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">           2846386.22         </div>				Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item <b>TARGETED VICTORY, LLC</b>				Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            05 / 01 / 2020         </div>	
Mailing Address 2311 WILSON BLVD SUITE 200				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           116050.00         </div>	
City ARLINGTON		State VA		Zip Code 22201	
Purpose of Expenditure DIGITAL ADVERTISING				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            04 / 30 / 2020         </div>	
Name of Federal Candidate: <input type="checkbox"/> Support BIDEN, JOSEPH R JR, , , <input checked="" type="checkbox"/> Oppose				Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">           2898416.20         </div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>				<div style="border: 1px solid black; padding: 2px; display: inline-block;">           418486.67         </div>	
<b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b>				<div style="border: 1px solid black; padding: 2px; display: inline-block;">           0.00         </div>	
<b>(c) TOTAL Independent Expenditures .....</b>				<div style="border: 1px solid black; padding: 2px; display: inline-block;">           418486.67         </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>PROCH, JON, , ,</u>				Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            05 / 20 / 2020         </div>	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 282 OF 282  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>AMERICA FIRST ACTION, INC.</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 10px;">C</span> <span>C00637512</span> </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span>			<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>THE STONERIDGE GROUP LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Mailing Address <b>960 NORTH POINT PKWY STE 225</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">78479.09</div>	
City <b>ALPHARETTA</b>	State <b>GA</b>	Zip Code <b>30005</b>	<b>Transaction ID : SE.98281</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Purpose of Expenditure <b>DIRECT MAIL: PRINTING AND POSTAGE</b>		Category/Type <div style="border: 1px solid black; height: 20px; width: 100px;"></div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>BIDEN, JOSEPH R JR, , ,</b>			Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; text-align: right;">1114642.67</div>			<div style="border: 1px solid black; padding: 2px; text-align: right;">78479.09</div>	

  

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span>  			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Mailing Address  			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">   </div>	
City  	State  	Zip Code  	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Purpose of Expenditure  		Category/Type <div style="border: 1px solid black; height: 20px; width: 100px;"></div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Name of Federal Candidate:  			Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; text-align: right;">   </div>			<div style="border: 1px solid black; padding: 2px; text-align: right;">   </div>	

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;">78479.09</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;">   </div>
(c) TOTAL Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;">5744802.42</div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PROCH, JON, , ,

Signature

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y