

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 Arlington VA 22202 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00637512 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period 10/15/2020 through 11/23/2020

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

Signature of Treasurer PROCH, JON, , , [Electronically Filed] Date 12/03/2020

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**AMERICA FIRST ACTION, INC.**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		18154316.68
(b) Cash on Hand at Beginning of Reporting Period.....	23400093.87	
(c) Total Receipts (from Line 19) .....	21155985.36	130649784.65
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	44556079.23	148804101.33
7. Total Disbursements (from Line 31).....	41186377.37	145434399.47
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	3369701.86	3369701.86
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) .....	3000.00	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**AMERICA FIRST ACTION, INC.**

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

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	21040266.67	127755899.78
(ii) Unitemized .....	3681.77	1618918.65
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	21043948.44	129374818.43
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	55000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	21048948.44	129429818.43
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).....	106904.83	1185402.85
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	132.09	34563.37
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)).....▶	21155985.36	130649784.65
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	21155985.36	130649784.65

**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 .....	1610218.76	11580927.37
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1610218.76	11580927.37
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) .....	39546108.61	133820069.12
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 .....	30050.00	33402.98
(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)).....	30050.00	33402.98
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)) ..	41186377.37	145434399.47
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	41186377.37	145434399.47

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	21048948.44	129429818.43
34. Total Contribution Refunds (from Line 28(d)) .....	30050.00	33402.98
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	21018898.44	129396415.45
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1610218.76	11580927.37
37. Offsets to Operating Expenditures (from Line 15, page 3).....	106904.83	1185402.85
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1503313.93	10395524.52

**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 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

**A. ADAMS, RUSTY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1500 WILLOW OAK  
 City ELBERTON State GA Zip Code 30635  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 10 / 19 / 2020  
**Transaction ID : SA11AI.226940**  
 Amount of Each Receipt this Period 6000.00  
 Memo Item

**B. ALLEVA, PETER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 108 MEADOWVIEW LANE  
 City MONT CLARE State PA Zip Code 19453  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) THE HOME DEPOT Occupation (for Individual) RETAIL SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.40

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.226943**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**C. AMERICA FIRST POLICIES, INC.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1400 CRYSTAL DRIVE SUITE 850  
 City ARLINGTON State VA Zip Code 22202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 20823468.00

Date of Receipt 10 / 28 / 2020  
**Transaction ID : SA11AI.226902**  
 Amount of Each Receipt this Period 2000000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2006035.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. AMERICA FIRST POLICIES, INC.**

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

Mailing Address 1400 CRYSTAL DRIVE  
SUITE 850

City ARLINGTON State VA Zip Code 22202

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
20923468.00

Date of Receipt  
11 / 06 / 2020  
**Transaction ID : SA11AI.227542**

Amount of Each Receipt this Period  
100000.00

Memo Item

**B. AMERICA FIRST POLICIES, INC.**

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

Mailing Address 1400 CRYSTAL DRIVE  
SUITE 850

City ARLINGTON State VA Zip Code 22202

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
21047386.00

Date of Receipt  
11 / 23 / 2020  
**Transaction ID : SA11AI.230060**

Amount of Each Receipt this Period  
123918.00

Memo Item  
IN-KIND - PAYROLL / OFFICE EXPENSES

**C. ANDERSON, DAVID, , ,**

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

Mailing Address 195 SE 1181 RD

City KNOB NOSTER State MO Zip Code 65336

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

Name of Employer (for Individual) Occupation (for Individual)  
NORTHROP GRUMMAN ENGINEER

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
10 / 23 / 2020  
**Transaction ID : SA11AI.226947**

Amount of Each Receipt this Period  
250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 224168.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. ANDERSON, JAMES, N, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1123 TYLEE ST  
 City VISTA State CA Zip Code 92083  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 16 / 2020  
**Transaction ID : SA11AI.226949**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. ARIZPE, ANDREW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1130 1/2 OLIVER AVE  
 City SAN DIEGO State CA Zip Code 92109  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TOPTAL Occupation (for Individual) PRODUCT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.226954**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. AYERS, STEVEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 48 MONTE VISTA DR  
 City SCOTTSBORO State AL Zip Code 35768  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HIGH COUNTRY TOYOTA Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1525.00

Date of Receipt 10 / 16 / 2020  
**Transaction ID : SA11AI.226957**  
 Amount of Each Receipt this Period 175.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1425.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. BABAYAN, LAURA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19 BREAKWATER SQUARE  
 City FREEHOLD State NJ Zip Code 07728  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) J & L CONSULTANTS Occupation (for Individual) ENVIRONMENTAL ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.226960**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. BACON, ANGIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1084 N COUNTRY CT  
 City FORTSON State GA Zip Code 31808  
 FEC ID number of contributing 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 10 / 15 / 2020  
**Transaction ID : SA11AI.226964**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. BARNETT, HOYT, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5815 LIVE OAK ROAD  
 City LAKELAND State FL Zip Code 33813  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 10 / 26 / 2020  
**Transaction ID : SA11AI.226969**  
 Amount of Each Receipt this Period 100000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 100275.00  
**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 10 OF 129  
(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.**

**A. BASSO, NICHOLAS, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 ▼ 605.00

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.226970**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. BENNETT, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 921065  
 City DUTCH HARBOR State AK Zip Code 99692  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UNISEA INC Occupation (for Individual) INVENTORY SPECIALIST 2  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.226979**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. BRAGAN, DOUGLAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 180 E PEARSON #4602  
 City CHICAGO State IL Zip Code 60611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) AD SALES  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 10 / 20 / 2020  
**Transaction ID : SA11AI.226984**  
 Amount of Each Receipt this Period 15000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 15110.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. BRAGAN, DOUGLAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 180 E PEARSON #4602  
 City CHICAGO State IL Zip Code 60611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) AD SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 75000.00

Date of Receipt 10 / 22 / 2020  
**Transaction ID : SA11AI.226985**  
 Amount of Each Receipt this Period 60000.00  
 Memo Item

**B. BRANIGAN, ALAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3800 FAIRFAX DR  
 City ARLINGTON State VA Zip Code 22203  
 FEC ID number of contributing 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 10 / 15 / 2020  
**Transaction ID : SA11AI.226986**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. BRODSKY, MARK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 157 W 57TH ST  
 City NEW YORK State NY Zip Code 10019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AURELIUS CAPITAL MANAGEMENT, LP Occupation (for Individual) INVESTMENT MANAGER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 10 / 17 / 2020  
**Transaction ID : SA11AI.226990**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	70025.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. BROMLEY, JOYCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8566 LARKHALL CIR #807C  
 City HUNTINGTON BEACH State CA Zip Code 92646  
 FEC ID number of contributing 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 11 / 15 / 2020  
**Transaction ID : SA11AI.227537**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. BROMLEY, JOYCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8566 LARKHALL CIR #807C  
 City HUNTINGTON BEACH State CA Zip Code 92646  
 FEC ID number of contributing 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 11 / 18 / 2020  
**Transaction ID : SA11AI.227535**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. BRUSH, DOUGLAS, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 512 ROSS ST  
 City DOWNS State KS Zip Code 67437  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 202.40

Date of Receipt 10 / 24 / 2020  
**Transaction ID : SA11AI.226996**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 OF 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. BRUST, SUSAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 262 SUNRISE AVE  
 City SAYVILLE State NY Zip Code 11782  
 FEC ID number of contributing 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 10 / 15 / 2020  
**Transaction ID : SA11AI.226997**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. BUCKLEY, WALTER, W, MR., JR.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11450 TURTLE BEACH RD  
 City N. PALM BEACH State FL Zip Code 33408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1260000.00

Date of Receipt 10 / 21 / 2020  
**Transaction ID : SA11AI.226998**  
 Amount of Each Receipt this Period 760000.00  
 Memo Item

**C. BURTON, WENDY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1312 PENNSYLVANIA 286  
 City EXPORT State PA Zip Code 15632  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PAINTER TOOL INC Occupation (for Individual) ACCOUNTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 23 / 2020  
**Transaction ID : SA11AI.227000**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	760275.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. BYRON, JIM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 PASEO AZUCENO  
 City RANCHO SANTA MARGARITA State CA Zip Code 92688  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RICHARD NIXON FOUNDATION Occupation (for Individual) EXEC VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2020  
**Transaction ID : SA11AI.227002**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. CARPENTER, LINDELL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 614 GILMER RD APT 21  
 City LONGVIEW State TX Zip Code 75604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SEYMOUR PROPERTIES Occupation (for Individual) SUPERVISOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.227007**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. CATALANO, FRANK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5832 VARNA AVE  
 City LOS ANGELES State CA Zip Code 91401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) USC Occupation (for Individual) COLLEGE PROFESSOR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 215.02

Date of Receipt 10 / 21 / 2020  
**Transaction ID : SA11AI.227012**  
 Amount of Each Receipt this Period 21.15  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	296.15
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 15 OF 129  
(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.**

**A. CATALANO, FRANK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5832 VARNA AVE  
 City LOS ANGELES State CA Zip Code 91401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) USC Occupation (for Individual) COLLEGE PROFESSOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.27

Date of Receipt 10 / 26 / 2020  
**Transaction ID : SA11AI.227013**  
 Amount of Each Receipt this Period 11.25  
 Memo Item

**B. CHAMBERS, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3620 BURLINGTON DR  
 City NORMAN State OK Zip Code 73072  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) IMMEDIATE SMILES Occupation (for Individual) CFO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 23 / 2020  
**Transaction ID : SA11AI.227017**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. CHILDS, JOHN, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 165 SAGO PALM RD  
 City VERO BEACH State FL Zip Code 32963  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) J.W. CHILDS ASSOCIATES Occupation (for Individual) INVESTMENTS  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 125000.00

Date of Receipt 10 / 30 / 2020  
**Transaction ID : SA11AI.227020**  
 Amount of Each Receipt this Period 125000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 125261.25  
**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 16 OF 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. CHOPP, AL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 204 18TH ST SW #1  
 City ROCHESTER State MN Zip Code 55902  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.227021**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. COULTER, JANICE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4201 S SANTANA DR  
 City WASILLA State AK Zip Code 99654  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.88

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.227029**  
 Amount of Each Receipt this Period 41.98  
 Memo Item

**C. COWELL, KAI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2186 ROUNDTOP DR  
 City HONOLULU State HI Zip Code 96822  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) SPICE MAKER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.227030**  
 Amount of Each Receipt this Period - 100.00  
 Memo Item  
**CHARGEBACK**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ - 33.02  
**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 17 OF 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. CUMMINS, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5151 SAN FELIPE ST  
 STE 1480  
 City HOUSTON State TX Zip Code 77056  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ENTREPRENEUR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 26 / 2020  
**Transaction ID : SA11AI.227038**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. CV STARR & COMPANY INC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 399 PARK AVE  
 FLOOR 8  
 City NEW YORK State NY Zip Code 10022-4614  
 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 10 / 19 / 2020  
**Transaction ID : SA11AI.226928**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item

**C. DEANER, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1321 UPLAND DR  
 STE 5033  
 City HOUSTON State TX Zip Code 77043  
 FEC ID number of contributing 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 10 / 21 / 2020  
**Transaction ID : SA11AI.227040**  
 Amount of Each Receipt this Period - 50.00  
 Memo Item  
**CHARGEBACK**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 54950.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. DEANER, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1321 UPLAND DR  
 STE 5033  
 City HOUSTON State TX Zip Code 77043  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 21 / 2020  
**Transaction ID : SA11AI.227041**  
 Amount of Each Receipt this Period - 50.00  
 Memo Item  
**CHARGEBACK**

**B. DEARHOLT, STEPHEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 36365 TRAIL RIDGE RD  
 City STEAMBOAT SPRINGS State CO Zip Code 80487  
 FEC ID number of contributing 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 10 / 25 / 2020  
**Transaction ID : SA11AI.227043**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. DENDY, JOYCE, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 712 ROYAL ADELADE DR  
 City COLLEGE STATION State TX Zip Code 77845  
 FEC ID number of contributing 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 11 / 18 / 2020  
**Transaction ID : SA11AI.227519**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	985.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 19 OF 129  
(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.**

**A. DENDY, JOYCE, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 712 ROYAL ADELADE DR  
 City COLLEGE STATION    State TX    Zip Code 77845  
 FEC ID number of contributing 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 11 / 18 / 2020  
**Transaction ID : SA11AI.227520**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**B. DRINKWATER, GENEVA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 495  
 City COTTONWOOD    State CA    Zip Code 96022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED    Occupation (for Individual) RETIRED  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.92

Date of Receipt 10 / 18 / 2020  
**Transaction ID : SA11AI.227056**  
 Amount of Each Receipt this Period 26.35  
 Memo Item

**C. DUGGAN, ROBERT, WILLIAM, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 616 DRUID RD E  
 City CLEARWATER    State FL    Zip Code 33756-3912  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED    Occupation (for Individual) ENTREPRENEUR  
 Receipt For:  Primary     General     Other (specify)  
 Aggregate Year-to-Date ▼ 4000000.00

Date of Receipt 10 / 30 / 2020  
**Transaction ID : SA11AI.227058**  
 Amount of Each Receipt this Period 4000000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4000061.35  
**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: (check only one)	PAGE 20 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address P.O. BOX 361

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 ▼  
2371.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2020

**Transaction ID : SA11AI.227065**

Amount of Each Receipt this Period  
5.00

Memo Item

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

Mailing Address 6554 BRIARMEADE DR

City DALLAS	State TX	Zip Code 75254
----------------	-------------	-------------------

FEC ID number of contributing 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
10		23		2020

**Transaction ID : SA11AI.227067**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 2000 E EDGEWOOD DR 102

City LAKELAND	State FL	Zip Code 33803
------------------	-------------	-------------------

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 ▼  
50000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2020

**Transaction ID : SA11AI.232588**

Amount of Each Receipt this Period  
50000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	501005.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 21 OF 129  
(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.**

**A. FECTEAU, PATRICIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 249 BECKLEY HILL RD  
 City BARRE State VT Zip Code 05641  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 366.80

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.227071**  
 Amount of Each Receipt this Period 52.40  
 Memo Item

**B. FEINBERG, STEPHEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 875 3RD AVE 11TH FL  
 City NEW YORK State NY Zip Code 10022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CERBERUS CAPITAL MANAGEMENT Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000000.00

Date of Receipt 11 / 02 / 2020  
**Transaction ID : SA11AI.227544**  
 Amount of Each Receipt this Period 1000000.00  
 Memo Item

**C. FROST, WAYNE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 27870 KNIGHT ST  
 City SANTA CLARITA State CA Zip Code 91384  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LA DEPT OF WATER AND POWER Occupation (for Individual) CONTROL OPERATOR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.227078**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 1000087.40  
**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 129  
(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.**

**A. GANNAWAY, BERRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 206 SKYLINE DR  
 City AUSTIN State TX Zip Code 78746  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) WAREHOUSE BUILDER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 10 / 20 / 2020  
**Transaction ID : SA11AI.227081**  
 Amount of Each Receipt this Period 3500.00  
 Memo Item

**B. GARDNER, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5880 N DOUGLAS HWY  
 City JUNEAU State AK Zip Code 99801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BARTLETT REGIONAL HOSPITAL Occupation (for Individual) CHIEF CLINICAL OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.227083**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. GARLING, BILL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 318 S FAYETTE ST  
 City SHIPPENSBURG State PA Zip Code 17257  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) LANDSCAPE CONTRACTOR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 10 / 22 / 2020  
**Transaction ID : SA11AI.227084**  
 Amount of Each Receipt this Period - 35.00  
 Memo Item  
**CHARGEBACK**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3515.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. GATORWORLD PARKS OF FLORIDA**

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

Mailing Address 492 W STATE RD 44

City WILDWOOD	State FL	Zip Code 34785
------------------	-------------	-------------------

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 ▼  
10000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2020

**Transaction ID : SA11AI.226932**

Amount of Each Receipt this Period  
10000.00

Memo Item

**B. GRANT, JAMIE, , ,**

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

Mailing Address 459 COLUMBUS AVE #335

City NEW YORK	State NY	Zip Code 10024
------------------	-------------	-------------------

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

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

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
10		19		2020

**Transaction ID : SA11AI.227093**

Amount of Each Receipt this Period  
500.00

Memo Item

**C. HAAS, GLEN, , ,**

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

Mailing Address 880 OPEN SKY CT

City ALLEN	State TX	Zip Code 75013
---------------	-------------	-------------------

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

Name of Employer (for Individual) ARAGIO SOLUTIONS	Occupation (for Individual) ENGINEER
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2020

**Transaction ID : SA11AI.227097**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. HEDEEN, CLEMENS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 228 N 14TH AVE  
 City STURGEON BAY State WI Zip Code 54235  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HEDEEN INTERNATIONAL Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 21 / 2020  
**Transaction ID : SA11AI.227101**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. HEDEEN, KAY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 228 N 14TH AVE  
 City STURGEON BAY State WI Zip Code 54235  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HEDEEN INTERNATIONAL Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 21 / 2020  
**Transaction ID : SA11AI.227102**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. HEGELER, BARTON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1988 CALLE MADRIGAL  
 City SAN DIEGO State CA Zip Code 92037  
 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 ▼ 250.00

Date of Receipt 10 / 23 / 2020  
**Transaction ID : SA11AI.227104**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. HIRSCH, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12 GEARY ST  
 STE 403  
 City SAN FRANCISCO State CA Zip Code 94108  
 FEC ID number of contributing 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 10 / 15 / 2020  
**Transaction ID : SA11AI.227106**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. HOLLOWAY, DANA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8018 PUDDLEDUCK LN  
 City SPRING HILL State TN Zip Code 37174  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2800.00

Date of Receipt 10 / 23 / 2020  
**Transaction ID : SA11AI.227110**  
 Amount of Each Receipt this Period 2800.00  
 Memo Item

**C. HORE, SATADRU, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 201 E 69TH ST  
 APT PHD  
 City NEW YORK State NY Zip Code 10021  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CREDIT SUISSE USA Occupation (for Individual) FINANCE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 19 / 2020  
**Transaction ID : SA11AI.227113**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. IRWIN, CHARLES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 RAILROAD ST  
 City HOLLY State MI Zip Code 48442  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ACME CONSTRUCTION Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 312.96

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.227117**  
 Amount of Each Receipt this Period 4.99  
 Memo Item

**B. JAKUBIAK, JEFFREY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1321 UPLAND DR  
 City HOUSTON State TX Zip Code 77043  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VALERIAN CAPITAL Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 23 / 2020  
**Transaction ID : SA11AI.227123**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

**C. JOHNSON, RAY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3692 JOYNER BRIDGE RD  
 City FOUR OAKS State NC Zip Code 27524  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 211.35

Date of Receipt 10 / 25 / 2020  
**Transaction ID : SA11AI.227125**  
 Amount of Each Receipt this Period - 50.00  
 Memo Item  
**CHARGEBACK**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1954.99
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. JOHNSON, TAMARA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 ▼ 530.00

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.227126**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. JORGENSEN, GEORGE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 150 SCARBOROUGH ST  
 City HARTFORD State CT Zip Code 06105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1149.28

Date of Receipt 10 / 16 / 2020  
**Transaction ID : SA11AI.227127**  
 Amount of Each Receipt this Period 104.48  
 Memo Item

**C. JORGENSEN, GEORGE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 150 SCARBOROUGH ST  
 City HARTFORD State CT Zip Code 06105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1253.76

Date of Receipt 10 / 16 / 2020  
**Transaction ID : SA11AI.227128**  
 Amount of Each Receipt this Period 104.48  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 258.96  
**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:	PAGE 28 OF 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. JORGENSEN, GEORGE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 150 SCARBOROUGH ST  
 City HARTFORD State CT Zip Code 06105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1358.24

Date of Receipt 11 / 08 / 2020  
**Transaction ID : SA11AI.227539**  
 Amount of Each Receipt this Period 104.48  
 Memo Item

**B. JORGENSEN, GEORGE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 150 SCARBOROUGH ST  
 City HARTFORD State CT Zip Code 06105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1462.72

Date of Receipt 11 / 08 / 2020  
**Transaction ID : SA11AI.227540**  
 Amount of Each Receipt this Period 104.48  
 Memo Item

**C. KAIN, CRAIG, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 150286 LAS VEGAS TRL  
 City FORT WORTH State TX Zip Code 76108  
 FEC ID number of contributing 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 10 / 21 / 2020  
**Transaction ID : SA11AI.227131**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	458.96
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

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

Mailing Address C/O CHADWICK AND COMPANY CPA  
 255 ROUTE 35N, STE. 102C

City RED BANK State NJ Zip Code 07701

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 21 / 2020

**Transaction ID : SA11AI.230070**

Amount of Each Receipt this Period  
 250000.00

Memo Item  
 PARTNERSHIP ATTRIBUTION [SA11A:226901]

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

Mailing Address P.O BOX 1449

City LA CANADA FLINTRIDGE State CA Zip Code 91012

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 ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 25 / 2020

**Transaction ID : SA11AI.227146**

Amount of Each Receipt this Period  
 100000.00

Memo Item

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

Mailing Address 1305 PENNY LN

City KELLER State TX Zip Code 76248

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

Name of Employer (for Individual) PS DEVELOPMENT Occupation (for Individual) PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 23 / 2020

**Transaction ID : SA11AI.227148**

Amount of Each Receipt this Period  
 250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 30 OF 129  
(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.**

**A. LAKE, ROGER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 77 US HWY 130  
 City TRENTON State NJ Zip Code 08620  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.52

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2020  
**Transaction ID : SA11AI.227153**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**B. LAKE, ROGER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 77 US HWY 130  
 City TRENTON State NJ Zip Code 08620  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.52

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 16 / 2020  
**Transaction ID : SA11AI.227154**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**C. LAKE, ROGER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 77 US HWY 130  
 City TRENTON State NJ Zip Code 08620  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.52

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 07 / 2020  
**Transaction ID : SA11AI.227495**  
 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**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. LANDRY, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address W 238 N 3239 HIGH MEADOW CT  
 City PEWAUKEE State WI Zip Code 53072  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AREA RENTAL Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.227159**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**B. LANDRY, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address W 238 N 3239 HIGH MEADOW CT  
 City PEWAUKEE State WI Zip Code 53072  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AREA RENTAL Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 10 / 24 / 2020  
**Transaction ID : SA11AI.227158**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. LAROSE, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1259 TRAIL RIDGE DR  
 City EL PASO State TX Zip Code 79912  
 FEC ID number of contributing 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 10 / 23 / 2020  
**Transaction ID : SA11AI.227161**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 800.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. LAXTON, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4809 PASEO DE LAS TORTUGAS  
 City TORRANCE State CA Zip Code 90505  
 FEC ID number of contributing 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 10 / 21 / 2020  
**Transaction ID : SA11AI.227163**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. LEMMINGER, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5650 PETERS DR  
 City WEST BEND State WI Zip Code 53095  
 FEC ID number of contributing 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 10 / 23 / 2020  
**Transaction ID : SA11AI.227170**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. LERWICK, STUART, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 518 UPLAND RD  
 City MEDINA State WA Zip Code 98039  
 FEC ID number of contributing 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 10 / 16 / 2020  
**Transaction ID : SA11AI.227172**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1500.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. LINDSTROM, CATHERINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2515 GOLDSRING LN  
 City SPRING State TX Zip Code 77373  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MAVERICK TUBE CORP Occupation (for Individual) SENIOR BACK OFFICE ANALYST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.227179**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. LOFTON, CHIP, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 312 ALLEGHENY DR  
 City ROXBORO State NC Zip Code 27573  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) MANUFACTURER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 22 / 2020  
**Transaction ID : SA11AI.227181**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. LOPEZ, MANUEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 300 KENT RD  
 City BROOMALL State PA Zip Code 19008  
 FEC ID number of contributing 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 11 / 03 / 2020  
**Transaction ID : SA11AI.227430**  
 Amount of Each Receipt this Period - 50.00  
 Memo Item  
**CHARGEBACK**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 975.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 129
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. LOPSHIRE, LARRY, , ,</b>		Date of Receipt
Mailing Address 845 WEST CUTSINGER RD		<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2020"/>
City GREENWOOD	State IN	Zip Code 46143
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.227183</b>
Name of Employer (for Individual) RETIRED		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. MARGOLIS, KATHERINE, , ,</b>		Date of Receipt
Mailing Address 704 RODMAN ST		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2020"/>
City PHILADELPHIA	State PA	Zip Code 19147
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.227193</b>
Name of Employer (for Individual) RETIRED		Amount of Each Receipt this Period <input type="text" value="500.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. MAXWELL, ROBERTA, , ,</b>		Date of Receipt
Mailing Address 3150 NE 36TH AVE LOT 458		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2020"/>
City OCALA	State FL	Zip Code 34479
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.227521</b>
Name of Employer (for Individual) RETIRED		Amount of Each Receipt this Period <input type="text" value="35.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="293.45"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1535.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 762 10TH AVE #4N

City NEW YORK	State NY	Zip Code 10019
------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
430.28

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2020

**Transaction ID : SA11AI.227198**

Amount of Each Receipt this Period  

- 20.00
---------

Memo Item  
CHARGEBACK

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

Mailing Address 762 10TH AVE #4N

City NEW YORK	State NY	Zip Code 10019
------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
419.55

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2020

**Transaction ID : SA11AI.227199**

Amount of Each Receipt this Period  

- 10.73
---------

Memo Item  
CHARGEBACK

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

Mailing Address 762 10TH AVE #4N

City NEW YORK	State NY	Zip Code 10019
------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
408.82

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2020

**Transaction ID : SA11AI.227200**

Amount of Each Receipt this Period  

- 10.73
---------

Memo Item  
CHARGEBACK

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	- 41.46
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 36 OF 129  
(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.**

**A. MCALEESE, LEATHA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 762 10TH AVE #4N  
 City NEW YORK State NY Zip Code 10019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 403.83

Date of Receipt 10 / 31 / 2020  
**Transaction ID : SA11AI.227462**  
 Amount of Each Receipt this Period - 4.99  
 Memo Item  
**CHARGEBACK**

**B. MCALEESE, LEATHA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 762 10TH AVE #4N  
 City NEW YORK State NY Zip Code 10019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 393.83

Date of Receipt 10 / 31 / 2020  
**Transaction ID : SA11AI.227463**  
 Amount of Each Receipt this Period - 10.00  
 Memo Item  
**CHARGEBACK**

**C. MCALEESE, LEATHA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 762 10TH AVE #4N  
 City NEW YORK State NY Zip Code 10019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 383.10

Date of Receipt 10 / 31 / 2020  
**Transaction ID : SA11AI.227464**  
 Amount of Each Receipt this Period - 10.73  
 Memo Item  
**CHARGEBACK**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ - 25.72  
**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 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. MCALEESE, LEATHA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 762 10TH AVE #4N  
 City NEW YORK State NY Zip Code 10019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 378.11

Date of Receipt 10 / 31 / 2020  
**Transaction ID : SA11AI.227465**  
 Amount of Each Receipt this Period - 4.99  
 Memo Item  
**CHARGEBACK**

**B. MCALPIN, LOUISE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 502 SPANISH TRACT RD  
 City SEWICKLEY State PA Zip Code 15143  
 FEC ID number of contributing 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 10 / 24 / 2020  
**Transaction ID : SA11AI.227201**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. MCCANN, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 515 W MAPLE ST  
 City CALDWELL State ID Zip Code 83605  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.227202**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1020.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. MCMAHON, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2801 CHATTERTON DR  
 City SAN ANGELO State TX Zip Code 76904  
 FEC ID number of contributing 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 10 / 17 / 2020  
**Transaction ID : SA11AI.227207**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. MCMAHON, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2801 CHATTERTON DR  
 City SAN ANGELO State TX Zip Code 76904  
 FEC ID number of contributing 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 10 / 19 / 2020  
**Transaction ID : SA11AI.227208**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. MCMAHON, LINDA, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 ▼ 12915717.40

Date of Receipt 10 / 16 / 2020  
**Transaction ID : SA11AI.227209**  
 Amount of Each Receipt this Period 10000000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 39 OF 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. MCNECE, GREGORY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 1830  
 City DAVIS State CA Zip Code 95617  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DAVISVILLE PROPERTIES INC Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 16 / 2020  
**Transaction ID : SA11AI.227212**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. MEINEN, JANE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 27715 BERING CROSSING DR  
 City KATY State TX Zip Code 77494  
 FEC ID number of contributing 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 10 / 15 / 2020  
**Transaction ID : SA11AI.227214**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. MERRILL, ARTHUR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 146 SUNSET AVE APT 1  
 City PALM BEACH State FL Zip Code 33480  
 FEC ID number of contributing 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 10 / 22 / 2020  
**Transaction ID : SA11AI.227217**  
 Amount of Each Receipt this Period - 1000.00  
 Memo Item  
**CHARGEBACK**

**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: (check only one)	PAGE 40 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. MERRILL, ARTHUR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 146 SUNSET AVE  
 APT 1  
 City PALM BEACH State FL Zip Code 33480  
 FEC ID number of contributing 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 10 / 26 / 2020  
**Transaction ID : SA11AI.227218**  
 Amount of Each Receipt this Period -1000.00  
 Memo Item  
**CHARGEBACK**

**B. MERRILL, LAVERNE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 27 N TIETJEN ST  
 PO BOX 324  
 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 ▼ 651.00

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.227219**  
 Amount of Each Receipt this Period 65.00  
 Memo Item

**C. MESHEAU, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 251 MOODY ST  
 City LUDLOW State MA Zip Code 01056  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) THE BUTLER CORPORATION Occupation (for Individual) OWNER/PRESIDENT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 16 / 2020  
**Transaction ID : SA11AI.227223**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 1565.00  
**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 41 OF 129  
(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.**

**A. METROCK, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 36  
 City MONTEVALLO State AL Zip Code 35115  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 22 / 2020  
**Transaction ID : SA11AI.227225**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. MILLER, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 34 TURTLE COVE RD PO BOX 232  
 City SANDWICH State MA Zip Code 02563  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 209.60

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.227229**  
 Amount of Each Receipt this Period 52.40  
 Memo Item

**C. MINAIDES, GUS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16 REGAL DR  
 City COLONIA State NJ Zip Code 07067  
 FEC ID number of contributing 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 10 / 15 / 2020  
**Transaction ID : SA11AI.227230**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5102.40  
**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 42 OF 129  
(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.**

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

Mailing Address 792 SWEETGUM RD

City DU QUOIN	State IL	Zip Code 62832
------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
315.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2020

**Transaction ID : SA11AI.227437**

Amount of Each Receipt this Period  

- 35.00
---------

Memo Item  
**CHARGEBACK**

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

Mailing Address 792 SWEETGUM RD

City DU QUOIN	State IL	Zip Code 62832
------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2020

**Transaction ID : SA11AI.227438**

Amount of Each Receipt this Period  

- 35.00
---------

Memo Item  
**CHARGEBACK**

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

Mailing Address 792 SWEETGUM RD

City DU QUOIN	State IL	Zip Code 62832
------------------	-------------	-------------------

FEC ID number of contributing 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
11	/	02	/	2020

**Transaction ID : SA11AI.227439**

Amount of Each Receipt this Period  

- 35.00
---------

Memo Item  
**CHARGEBACK**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	- 105.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 129
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. MORGAN, MILDRED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 792 SWEETGUM RD  
 City DU QUOIN State IL Zip Code 62832  
 FEC ID number of contributing 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 11 / 02 / 2020  
**Transaction ID : SA11AI.227440**  
 Amount of Each Receipt this Period - 35.00  
 Memo Item  
**CHARGEBACK**

**B. MORTON, EUGENE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 553 ARROW RD  
 City JASPER State AL Zip Code 35501  
 FEC ID number of contributing 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 10 / 16 / 2020  
**Transaction ID : SA11AI.227236**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. MORY, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3161 S SALEM CHURCH RD  
 City YORK State PA Zip Code 17408  
 FEC ID number of contributing 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 10 / 15 / 2020  
**Transaction ID : SA11AI.227237**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	65.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 44 OF 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. MOSKOWITZ, CHERNA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4744 NORTH BAY ROAD  
 City MIAMI BEACH State FL Zip Code 33140  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HAWAIIAN GARDENS CASINO Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000000.00

Date of Receipt 10 / 27 / 2020  
**Transaction ID : SA11AI.227238**  
 Amount of Each Receipt this Period 1000000.00  
 Memo Item

**B. MOUNTJOY, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 25157 OLD OFFICE RD  
 City CULPEPER State VA Zip Code 22701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LOCUST GLEN FARM Occupation (for Individual) FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.227240**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. NGUYEN, AN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4837 LAKELAND AVE N  
 City MINNEAPOLIS State MN Zip Code 55429  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 345.73

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.227248**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000050.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 1601 E PLACITA PLUMA

City TUCSON	State AZ	Zip Code 85718
----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
626.88

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2020

**Transaction ID : SA11AI.227252**

Amount of Each Receipt this Period  
104.48

Memo Item

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

Mailing Address 873 WOODACRES RD

City SANTA MONICA	State CA	Zip Code 90402
----------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2020

**Transaction ID : SA11AI.227258**

Amount of Each Receipt this Period  
10000.00

Memo Item

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

Mailing Address P.O. BOX 563

City HOBART	State IN	Zip Code 46342
----------------	-------------	-------------------

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

Name of Employer (for Individual) RUWALDT PACKING CO	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1125.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2020

**Transaction ID : SA11AI.227256**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11104.48
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 626 N DIXIE HWY

City WEST PALM BEACH	State FL	Zip Code 33401
-------------------------	-------------	-------------------

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 ▼  
450000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2020

**Transaction ID : SA11AI.226933**

Amount of Each Receipt this Period  
200000.00

Memo Item

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

Mailing Address 5 SEMINOLE DR

City ST. AUGUSTINE	State FL	Zip Code 32084
-----------------------	-------------	-------------------

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

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

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
10		15		2020

**Transaction ID : SA11AI.227259**

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 701 W PARKWAY AVE

City HIGH POINT	State NC	Zip Code 27262
--------------------	-------------	-------------------

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

Name of Employer (for Individual) CAROLINA ANESTHESIOLOGY	Occupation (for Individual) PHYSICIAN
--	--

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
10		25		2020

**Transaction ID : SA11AI.227261**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200275.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. PACK, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1700 PADDOCK LN  
 City TURLOCK State CA Zip Code 95382  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt 10 / 24 / 2020  
**Transaction ID : SA11AI.227263**  
 Amount of Each Receipt this Period 2200.00  
 Memo Item

**B. PALLANTE, JASON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1420 N ST NW STE 102  
 City WASHINGTON State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AMERICA GREAT PAC Occupation (for Individual) POLITICAL ADVOCACY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 10 / 25 / 2020  
**Transaction ID : SA11AI.227265**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item

**C. PARKER, DAVID, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1700 N SHACKLEFORD RD  
 City LITTLE ROCK State AR Zip Code 72212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PARKER CADILLAC INC Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 16 / 2020  
**Transaction ID : SA11AI.227267**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	28200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. PERRY, SCOTT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 270  
 2002 RT 17M  
 City GOSHEN State NY Zip Code 10924  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ATLAS SECURITY SERVICES Occupation (for Individual) ADMIN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 19 / 2020  
**Transaction ID : SA11AI.227275**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. PETERKA, KEITH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 274 BUCKINGHAM DR  
 City BETHLEHEM State PA Zip Code 18017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ANCHIN Occupation (for Individual) CPA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 16 / 2020  
**Transaction ID : SA11AI.227277**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. PHELPS, CHRISTINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 210 RIM CANYON PKWY  
 City OROVILLE State CA Zip Code 95966  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 260.93

Date of Receipt 10 / 19 / 2020  
**Transaction ID : SA11AI.227281**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1025.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 210 RIM CANYON PKWY

City OROVILLE	State CA	Zip Code 95966
------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
285.93

Date of Receipt  

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

**Transaction ID : SA11AI.227515**

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 3001 WEBER PL

City OAKTON	State VA	Zip Code 22124
----------------	-------------	-------------------

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

Name of Employer (for Individual) PROMONTORY INTERFINANCIAL	Occupation (for Individual) LAWYER
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2020

**Transaction ID : SA11AI.227282**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 7580 PAIUTE POINT RD

City ROSEVILLE	State CA	Zip Code 95747
-------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
251.88

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2020

**Transaction ID : SA11AI.227283**

Amount of Each Receipt this Period  
41.98

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1066.98
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. PORTER, TEDDY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6773 S 69TH E AVE  
 City TULSA State OK Zip Code 74133  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DL Occupation (for Individual) MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 16 / 2020  
**Transaction ID : SA11AI.227285**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. PORZIO, JULIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 34 SOUTHGATE RD  
 City WATERBURY State CT Zip Code 06708  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PORZIO LAW OFFICE Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 19 / 2020  
**Transaction ID : SA11AI.227287**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. REITZ, EDWARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17537 SE CONCH BAR AVE  
 City JUPITER State FL Zip Code 33469  
 FEC ID number of contributing 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 10 / 15 / 2020  
**Transaction ID : SA11AI.227295**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1525.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 51 OF 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. RITTER, CHARLES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11631 KNIGHTSBRIDGE PL  
 City WELLINGTON State FL Zip Code 33449  
 FEC ID number of contributing 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 11 / 10 / 2020  
**Transaction ID : SA11AI.227427**  
 Amount of Each Receipt this Period - 100.00  
 Memo Item  
**CHARGEBACK**

**B. ROACH, MARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 962 LILAC LN  
 City BEDFORD State IN Zip Code 47421  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 626.88

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.227296**  
 Amount of Each Receipt this Period 104.48  
 Memo Item

**C. ROBBINS, RAY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 114 SHADY VALLEY DR  
 City CHESTERFIELD State MO Zip Code 63017  
 FEC ID number of contributing 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 10 / 15 / 2020  
**Transaction ID : SA11AI.227297**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 29.48  
**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: (check only one)	PAGE 52 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. ROFF, BARBARA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15 BAY ACRES DR  
 City CAPE MAY COURT HOUSE State NJ Zip Code 08210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LONG & FOSTER Occupation (for Individual) REALTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 10 / 17 / 2020  
**Transaction ID : SA11AI.227298**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. SCANLON, MILE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6101 MIAMI ST  
 City SOUTH BEND State IN Zip Code 46614  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KW SERVICES Occupation (for Individual) GENERAL FOREMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 209.90

Date of Receipt 10 / 24 / 2020  
**Transaction ID : SA11AI.227305**  
 Amount of Each Receipt this Period 41.98  
 Memo Item

**C. SELIGMAN, SCOTT, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address ONE TOWNE SQUARE STE 1913  
 City SOUTHFIELD State MI Zip Code 48076  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELIGMAN & ASSOCIATES Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 10 / 22 / 2020  
**Transaction ID : SA11AI.227308**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 25091.98  
**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 Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. SEPERSKY, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 65 SOUTHWORTH ST  
 City LAKEVILLE State MA Zip Code 02347  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2020  
**Transaction ID : SA11AI.227310**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. SIMON, DAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3665 WOODSIDE RD  
 City WOODSIDE State CA Zip Code 94062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 21 / 2020  
**Transaction ID : SA11AI.227317**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. SLOWEY, PATRICK, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 171 BINNACLE RD  
 City BRICK State NJ Zip Code 08723  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 26 / 2020  
**Transaction ID : SA11AI.227318**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. SMITH, RORY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22512 WITTE RD SE  
 City MAPLE VALLEY State WA Zip Code 98038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TRI-MED AMBULANCE Occupation (for Individual) CABULANCE DRIVER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 731.36

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.227323**  
 Amount of Each Receipt this Period 104.48  
 Memo Item

**B. SOVERNS, ELIZABETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1357  
 City ANGELS CAMP State CA Zip Code 95222  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 381.35

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.227327**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. SPADACINO, MARK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2406 COURTNEY MEADOWS CT #304  
 City TAMPA State FL Zip Code 33619  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CLAYTON COVIUS Occupation (for Individual) OPS MANAGER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2020  
**Transaction ID : SA11AI.227329**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	379.48
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 55 OF 129  
(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.**

**A. STARR INSURANCE HOLDINGS INC.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 399 PARK AVE  
 FLOOR 8  
 City NEW YORK State NY Zip Code 10022-4614  
 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 10 / 19 / 2020  
**Transaction ID : SA11AI.226930**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item

**B. STAUFFER, MELVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 105 LINDEN GROVE RD  
 City NEW HOLLAND State PA Zip Code 17557  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 SELF-EMPLOYED MANUFACTURING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 16 / 2020  
**Transaction ID : SA11AI.227331**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. STEPHANIE, BEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 426 GREENBRIAR AVE  
 City FOND DU LAC State WI Zip Code 54935  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 WISCONSIN CHEESE WORLDWIDE INC OWNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 16 / 2020  
**Transaction ID : SA11AI.227333**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 1 N CLEMATIS ST  
STE 200

City WEST PALM BEACH	State FL	Zip Code 33401
-------------------------	-------------	-------------------

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 ▼  
475000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2020

**Transaction ID : SA11AI.226899**

Amount of Each Receipt this Period  
200000.00

Memo Item

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

Mailing Address 3715 CEDAR AVE

City LONG BEACH	State CA	Zip Code 90807
--------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
625.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2020

**Transaction ID : SA11AI.227334**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. SUGAR FARMS CO-OP DBA, NEW HOPE SUGAR CO-OP**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 626 N DIXIE HWY

City WEST PALM BEACH	State FL	Zip Code 33401
-------------------------	-------------	-------------------

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 ▼  
450000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2020

**Transaction ID : SA11AI.226934**

Amount of Each Receipt this Period  
200000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400025.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 57 OF 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 84 RUSSELL RD

City GARDEN CITY	State NY	Zip Code 11530
---------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2020

**Transaction ID : SA11AI.227338**

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 222 LAKEVIEW AVE  
STE 1200

City WEST PALM BEACH	State FL	Zip Code 33401
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) TEMPLETON COMPANY	Occupation (for Individual) CPA
--	------------------------------------

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
10		21		2020

**Transaction ID : SA11AI.227340**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 106 NE CHARLESTON OAKS DR

City PORT ST. LUCIE	State FL	Zip Code 34983
------------------------	-------------	-------------------

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

Name of Employer (for Individual) CT, INC.	Occupation (for Individual) CFO
---	------------------------------------

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
10		22		2020

**Transaction ID : SA11AI.227342**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2025.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 58 OF 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. TOEDTEMEIER, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15880 MEADOW KING CT  
 City ALPHARETTA State GA Zip Code 30004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.227349**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. TRAN, DOMINIC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4149 WINSLOW DR  
 City GRAND PRAIRIE State TX Zip Code 75052  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 236.35

Date of Receipt 10 / 20 / 2020  
**Transaction ID : SA11AI.227352**  
 Amount of Each Receipt this Period - 25.00  
 Memo Item  
**CHARGEBACK**

**C. TRAN, DOMINIC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4149 WINSLOW DR  
 City GRAND PRAIRIE State TX Zip Code 75052  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.35

Date of Receipt 10 / 20 / 2020  
**Transaction ID : SA11AI.227353**  
 Amount of Each Receipt this Period - 25.00  
 Memo Item  
**CHARGEBACK**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	- 25.00
<b>TOTAL</b> This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 59 OF 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. TUNEBERG, PERRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4040 MORSAY DR  
 City ROCKFORD State IL Zip Code 61107  
 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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 25 / 2020  
**Transaction ID : SA11AI.227357**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. UEHLING, MARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 901 LYNTON PL  
 City MCLEAN State VA Zip Code 22102  
 FEC ID number of contributing 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  
 10 / 23 / 2020  
**Transaction ID : SA11AI.227359**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. WAGNER, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 MONTECITO DR  
 City CORONA DEL MAR State CA Zip Code 92625  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RKW DEVELOPMENT CORP Occupation (for Individual) REAL ESTATE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2020  
**Transaction ID : SA11AI.227367**  
 Amount of Each Receipt this Period  
 10000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 60 OF 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

**A. WAY, PHILLIP, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2822 NORTHWOOD ST  
 City GRAPEVINE State TX Zip Code 76051  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VINSON ELKINS LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 19 / 2020  
**Transaction ID : SA11AI.227373**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. WEIDNER, WILLIAM, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9711 ORIENT EXPRESS CT  
 City LAS VEGAS State NV Zip Code 89145-8702  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GAMING ASSET MANAGEMENT Occupation (for Individual) CHAIR AND CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 35000.00

Date of Receipt 10 / 27 / 2020  
**Transaction ID : SA11AI.227377**  
 Amount of Each Receipt this Period 35000.00  
 Memo Item

**C. WEINBERGER, LUCILLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10205 ORKINEY DR  
 City LAS VEGAS State NV Zip Code 89144  
 FEC ID number of contributing 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 10 / 16 / 2020  
**Transaction ID : SA11AI.227378**  
 Amount of Each Receipt this Period - 100.00  
 Memo Item  
**CHARGEBACK**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	35900.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. WEST SIDE AVENUE HOLDINGS LLC**

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

Mailing Address 129 EAST 61ST STREET

City NEW YORK	State NY	Zip Code 10065
------------------	-------------	-------------------

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 ▼  
250000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2020

**Transaction ID : SA11AI.226901**

Amount of Each Receipt this Period  
250000.00

Memo Item  
SEE MEMO ATTRIBUTION

**B. WHITMAN, BRAD, , ,**

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

Mailing Address 1069 WHITEGATE RD

City WAYNE	State PA	Zip Code 19087
---------------	-------------	-------------------

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

Name of Employer (for Individual) RENOVUS ASSOCIATES	Occupation (for Individual) PRIVATE EQUITY INVESTOR
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
20000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2020

**Transaction ID : SA11AI.227384**

Amount of Each Receipt this Period  
20000.00

Memo Item

**C. WILLIAMSON, GREG, , ,**

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

Mailing Address 1116 SPRING VALLEY LN NE

City ATLANTA	State GA	Zip Code 30306
-----------------	-------------	-------------------

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

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) REAL ESTATE
--	--

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
10		21		2020

**Transaction ID : SA11AI.227386**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	270500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. WILSON, LORRAINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1010 RED MILL DR  
 City TECUMSEH State MI Zip Code 49286  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) EASTERN MICHIGAN UNIVERSITY Occupation (for Individual) PROFESSOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.227387**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. WILSON, MORGAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 322 VIA LAGUNA VISTA  
 City SAN LUIS OBISPO State CA Zip Code 93405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 19 / 2020  
**Transaction ID : SA11AI.227389**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. WOLFE, ANDREW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1029 LAKE FRANCES DR  
 City GRETNA State LA Zip Code 70056  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LOYOLA UNIVERSITY NEW ORLEANS Occupation (for Individual) PROFESSOR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11AI.227393**  
 Amount of Each Receipt this Period 400.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5410.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. WOO, STANLEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 162 OLD FIELD RD  
 City PLYMOUTH State MA Zip Code 02360  
 FEC ID number of contributing 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  
 10 / 15 / 2020  
**Transaction ID : SA11AI.227394**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B. WOO, STANLEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 162 OLD FIELD RD  
 City PLYMOUTH State MA Zip Code 02360  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (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  
 11 / 08 / 2020  
**Transaction ID : SA11AI.227444**  
 Amount of Each Receipt this Period  
 - 25.00  
 Memo Item  
**CHARGEBACK**

**C. WU, JINGBO, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18345 DALNY RD  
 City JAMAICA State NY Zip Code 11432  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MERCY HOSPITAL AND MEDICAL CENTER Occupation (for Individual) RESIDENT PHYSICIAN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 16 / 2020  
**Transaction ID : SA11AI.227397**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	25.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 64 OF 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 25 / 2020  
**Transaction ID : SA11AI.227398**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. YINGLING, LARRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 512 1500N AVE  
 City MOUNT STERLING State IL Zip Code 62353  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SERVICEMASTER CLEANING & RESTORATION Occupation (for Individual) OWNER  
 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  
 10 / 15 / 2020  
**Transaction ID : SA11AI.227399**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

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

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	275.00
<b>TOTAL</b> This Period (last page this line number only).....	21040266.67



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

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

FOR LINE NUMBER: PAGE 65 OF 129  
(check only one)

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

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

**A. CAMPAIGN FOR WORKING FAMILIES**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2800 SHIRLINGTON ROAD, SUITE 930

City ARLINGTON	State VA	Zip Code 22206
-------------------	-------------	-------------------

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 ▼  
5000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10	/	27	/	2020

**Transaction ID : SA11C.230064**

Amount of Each Receipt this Period  
5000.00

Memo Item

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

Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

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

**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 66 OF 129
<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.**

**A. STRIPE**

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

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 ▼  
3498.72

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2020

**Transaction ID : SA15.226909**

Amount of Each Receipt this Period  
0.70

Memo Item  
**VENDOR REFUND: FEE REVERSAL**

**B. STRIPE**

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

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 ▼  
3499.42

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2020

**Transaction ID : SA15.226910**

Amount of Each Receipt this Period  
0.70

Memo Item  
**VENDOR REFUND: FEE REVERSAL**

**C. STRIPE**

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

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 ▼  
3499.77

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2020

**Transaction ID : SA15.226911**

Amount of Each Receipt this Period  
0.35

Memo Item  
**VENDOR REFUND: FEE REVERSAL**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1.75
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 67 OF 129  
(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.**

**A. STRIPE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 ▼  
 3499.92

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2020  
**Transaction ID : SA15.226912**  
 Amount of Each Receipt this Period  
 0.15  
 Memo Item  
**VENDOR REFUND: FEE REVERSAL**

**B. STRIPE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 ▼  
 3500.29

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2020  
**Transaction ID : SA15.226913**  
 Amount of Each Receipt this Period  
 0.37  
 Memo Item  
**VENDOR REFUND: FEE REVERSAL**

**C. STRIPE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 ▼  
 3500.66

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2020  
**Transaction ID : SA15.226914**  
 Amount of Each Receipt this Period  
 0.37  
 Memo Item  
**VENDOR REFUND: FEE REVERSAL**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.89  
**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 68 OF 129
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

**A. STRIPE**

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

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 ▼  
3500.73

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2020

**Transaction ID : SA15.226915**

Amount of Each Receipt this Period  
0.07

Memo Item  
VENDOR REFUND: FEE REVERSAL

**B. STRIPE**

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

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 ▼  
3500.77

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2020

**Transaction ID : SA15.226916**

Amount of Each Receipt this Period  
0.04

Memo Item  
VENDOR REFUND: FEE REVERSAL

**C. STRIPE**

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

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 ▼  
3518.90

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2020

**Transaction ID : SA15.226917**

Amount of Each Receipt this Period  
18.13

Memo Item  
VENDOR REFUND: FEE REVERSAL

<b>SUBTOTAL</b> of Receipts This Page (optional).....	18.24
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 69 OF 129  
(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.**

**A. STRIPE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 ▼  
 3519.25

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 21 / 2020  
**Transaction ID : SA15.226918**  
 Amount of Each Receipt this Period  
 0.35  
 Memo Item  
**VENDOR REFUND: FEE REVERSAL**

**B. STRIPE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 ▼  
 3519.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 21 / 2020  
**Transaction ID : SA15.226919**  
 Amount of Each Receipt this Period  
 0.35  
 Memo Item  
**VENDOR REFUND: FEE REVERSAL**

**C. STRIPE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 ▼  
 3520.30

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 23 / 2020  
**Transaction ID : SA15.226920**  
 Amount of Each Receipt this Period  
 0.70  
 Memo Item  
**VENDOR REFUND: FEE REVERSAL**

**SUBTOTAL** of Receipts This Page (optional).....▶ 1.40  
**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 70 OF 129  
(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
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NAME OF COMMITTEE (In Full)  
**AMERICA FIRST ACTION, INC.**

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

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 ▼  
3521.94

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2020

**Transaction ID : SA15.226921**

Amount of Each Receipt this Period  
1.64

Memo Item  
VENDOR REFUND: FEE REVERSAL

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

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 ▼  
3522.09

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2020

**Transaction ID : SA15.226922**

Amount of Each Receipt this Period  
0.15

Memo Item  
VENDOR REFUND: FEE REVERSAL

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

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 ▼  
3522.24

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2020

**Transaction ID : SA15.226923**

Amount of Each Receipt this Period  
0.15

Memo Item  
VENDOR REFUND: FEE REVERSAL

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1.94
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 71 OF 129  
(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.**

**A. STRIPE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 ▼  
 3522.38

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 26 / 2020  
**Transaction ID : SA15.226924**  
 Amount of Each Receipt this Period  
 0.14  
 Memo Item  
**VENDOR REFUND: FEE REVERSAL**

**B. STRIPE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 ▼  
 3522.67

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 27 / 2020  
**Transaction ID : SA15.226925**  
 Amount of Each Receipt this Period  
 0.29  
 Memo Item  
**VENDOR REFUND: FEE REVERSAL**

**C. STRIPE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 ▼  
 3567.67

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2020  
**Transaction ID : SA15.226926**  
 Amount of Each Receipt this Period  
 45.00  
 Memo Item  
**VENDOR REFUND: FEE REVERSAL**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 45.43  
**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 72 OF 129
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

**A. STRIPE**

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

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 ▼  
3567.81

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2020

**Transaction ID : SA15.227471**

Amount of Each Receipt this Period  
0.14

Memo Item  
VENDOR REFUND: FEE REVERSAL

**B. STRIPE**

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

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 ▼  
3567.95

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2020

**Transaction ID : SA15.227472**

Amount of Each Receipt this Period  
0.14

Memo Item  
VENDOR REFUND: FEE REVERSAL

**C. STRIPE**

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

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 ▼  
3568.09

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2020

**Transaction ID : SA15.227473**

Amount of Each Receipt this Period  
0.14

Memo Item  
VENDOR REFUND: FEE REVERSAL

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.42
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

FOR LINE NUMBER: PAGE 73 OF 129  
(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.**

**A. STRIPE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 ▼  
 3568.34

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 02 / 2020  
**Transaction ID : SA15.227476**  
 Amount of Each Receipt this Period  
 0.25  
 Memo Item  
**VENDOR REFUND: FEE REVERSAL**

**B. STRIPE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 ▼  
 3568.59

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 02 / 2020  
**Transaction ID : SA15.227477**  
 Amount of Each Receipt this Period  
 0.25  
 Memo Item  
**VENDOR REFUND: FEE REVERSAL**

**C. STRIPE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 ▼  
 3568.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 02 / 2020  
**Transaction ID : SA15.227478**  
 Amount of Each Receipt this Period  
 0.35  
 Memo Item  
**VENDOR REFUND: FEE REVERSAL**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.85  
**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 74 OF 129  
(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.**

**A. STRIPE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 ▼  
 3583.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2020  
**Transaction ID : SA15.227500**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item  
**VENDOR REFUND: FEE REVERSAL**

**B. STRIPE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 ▼  
 3598.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2020  
**Transaction ID : SA15.227501**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item  
**VENDOR REFUND: FEE REVERSAL**

**C. STRIPE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 ▼  
 3599.12

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 08 / 2020  
**Transaction ID : SA15.227474**  
 Amount of Each Receipt this Period  
 0.18  
 Memo Item  
**VENDOR REFUND: FEE REVERSAL**

**SUBTOTAL** of Receipts This Page (optional).....▶ 30.18  
**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 75 OF 129
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

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

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 ▼  
3599.30

Date of Receipt  
MM / DD / YYYY  
11 / 08 / 2020

**Transaction ID : SA15.227475**

Amount of Each Receipt this Period  
0.18

Memo Item  
VENDOR REFUND: FEE REVERSAL

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

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 ▼  
3599.38

Date of Receipt  
MM / DD / YYYY  
11 / 09 / 2020

**Transaction ID : SA15.227470**

Amount of Each Receipt this Period  
0.08

Memo Item  
VENDOR REFUND: FEE REVERSAL

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

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 ▼  
3600.48

Date of Receipt  
MM / DD / YYYY  
11 / 09 / 2020

**Transaction ID : SA15.227479**

Amount of Each Receipt this Period  
1.10

Memo Item  
VENDOR REFUND: FEE REVERSAL

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1.36
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 76 OF 129  
(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.**

**A. STRIPE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 ▼  
 3607.48

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 10 / 2020  
**Transaction ID : SA15.227491**  
 Amount of Each Receipt this Period  
 7.00  
 Memo Item  
**VENDOR REFUND: FEE REVERSAL**

**B. STRIPE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 ▼  
 3636.25

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 12 / 2020  
**Transaction ID : SA15.227516**  
 Amount of Each Receipt this Period  
 28.77  
 Memo Item  
**VENDOR REFUND: FEE REVERSAL**

**C. STRIPE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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 ▼  
 3653.10

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 16 / 2020  
**Transaction ID : SA15.227502**  
 Amount of Each Receipt this Period  
 16.85  
 Memo Item  
**VENDOR REFUND: FEE REVERSAL**

**SUBTOTAL** of Receipts This Page (optional).....▶ 52.62  
**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 77 OF 129
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

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

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 ▼  
3705.22

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2020

**Transaction ID : SA15.227531**

Amount of Each Receipt this Period  
52.12

Memo Item  
VENDOR REFUND: FEE REVERSAL

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

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 ▼  
3706.92

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		18		2020

**Transaction ID : SA15.227480**

Amount of Each Receipt this Period  
1.70

Memo Item  
VENDOR REFUND: FEE REVERSAL

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

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 ▼  
3756.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		19		2020

**Transaction ID : SA15.227527**

Amount of Each Receipt this Period  
49.08

Memo Item  
VENDOR REFUND: FEE REVERSAL

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	102.90
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 78 OF 129
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

**A. XL SPECIALTY INSURANCE CO**

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

Mailing Address 100 CONSTRUCTIONAL PLZ

City HARTFORD	State CT	Zip Code 06103
------------------	-------------	-------------------

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 ▼  
781646.85

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		19		2020

**Transaction ID : SA15.227402**

Amount of Each Receipt this Period  

106646.85
-----------

Memo Item  
**SETTLEMENT PAYMENT**

**B.**

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

Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period  

--

Memo Item

**C.**

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

Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period  

--

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	106646.85
<b>TOTAL</b> This Period (last page this line number only).....	106904.83

**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 79 OF 129
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. CHAIN BRIDGE BANK</b>		Date of Receipt
Mailing Address 1445-A LAUGHLIN AVE		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City MCLEAN	State VA	Zip Code 22101
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA17.226903</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="0.19"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="34431.47"/>	<b>INTEREST</b>

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. CHAIN BRIDGE BANK</b>		Date of Receipt
Mailing Address 1445-A LAUGHLIN AVE		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City MCLEAN	State VA	Zip Code 22101
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA17.226904</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="131.90"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="34563.37"/>	<b>INTEREST</b>

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C.</b>		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text"/>
Name of Employer (for Individual)		<input type="checkbox"/> Memo Item
Occupation (for Individual)		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="132.09"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="132.09"/>

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. 1ST BANKCARD**

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

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

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

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.22686**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. 1ST BANKCARD**

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

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

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

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.22686**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. 1ST BANKCARD**

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

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

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

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.22746**  
Amount of Each Disbursement this Period

Memo Item

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

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. 1ST BANKCARD**

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

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

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

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.22740**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. 1ST BANKCARD**

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

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

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

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.22740**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. 1ST BANKCARD**

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

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

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

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.22740**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. AMERICA FIRST POLICIES, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 23 / 2020
Mailing Address 1400 CRYSTAL DRIVE SUITE 850		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.23006</b> Amount of Each Disbursement this Period 123918.00
City ARLINGTON	State VA	Zip Code 22202
Purpose of Disbursement IN-KIND - PAYROLL / OFFICE EXPENSES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. BASSWOOD RESEARCH</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020
Mailing Address AIR RIGHTS CENTER, NORTH TOWER 4550 MONTGOMERY AVE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.22686</b> Amount of Each Disbursement this Period 23345.00
City BETHESDA	State MD	Zip Code 20814
Purpose of Disbursement POLLING EXPENSE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. BASSWOOD RESEARCH</b>		Date of Disbursement MM / DD / YYYY 10 / 20 / 2020
Mailing Address AIR RIGHTS CENTER, NORTH TOWER 4550 MONTGOMERY AVE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.22687</b> Amount of Each Disbursement this Period 23915.00
City BETHESDA	State MD	Zip Code 20814
Purpose of Disbursement POLLING EXPENSE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	171178.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. BULLDOG COMPLIANCE</b>		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020
Mailing Address 138 CONANT ST 2ND FLOOR		FEC Identification Number C [ ] <b>Transaction ID : SB21B.22689</b> Amount of Each Disbursement this Period 6850.00
City BEVERLY	State MA	Zip Code 01915
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CHAIN BRIDGE BANK</b>		Date of Disbursement MM / DD / YYYY 11 / 13 / 2020
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.22740</b> Amount of Each Disbursement this Period 50.84
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK FEES		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. DOUG COULTER PHOTOGRAPHY</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2020
Mailing Address 1415 HORSESHOE CREEK LANE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.22687</b> Amount of Each Disbursement this Period 7500.00
City CUMMING	State GA	Zip Code 30041
Purpose of Disbursement PHOTOGRAPHY SERVICES		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	14400.84
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. FORWARD STRATEGIES**

Mailing Address 7222 ANHINGA FARMS RD

City  
TALLAHASSEE

State  
FL

Zip Code  
32309

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 27 / 2020

FEC Identification Number

C  
**Transaction ID : SB21B.22687**  
Amount of Each Disbursement this Period  
55000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. FORWARD STRATEGIES**

Mailing Address 7222 ANHINGA FARMS RD

City  
TALLAHASSEE

State  
FL

Zip Code  
32309

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 28 / 2020

FEC Identification Number

C  
**Transaction ID : SB21B.22687**  
Amount of Each Disbursement this Period  
12500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. JONES DAY**

Mailing Address PO BOX 7805  
BEN FRANKLIN STATION

City  
WASHINGTON

State  
DC

Zip Code  
20044

Purpose of Disbursement  
LEGAL RETAINER

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 27 / 2020

FEC Identification Number

C  
**Transaction ID : SB21B.22687**  
Amount of Each Disbursement this Period  
910525.00

Memo Item

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

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

978025.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. ONMESSAGE INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2020
Mailing Address 705 MELVIN AVE #105		FEC Identification Number C [ ] <b>Transaction ID : SB21B.22686</b> Amount of Each Disbursement this Period [ ] 24296.25
City ANNAPOLIS	State MD	Zip Code 21401
Purpose of Disbursement POLLING EXPENSE		Category/Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ONMESSAGE INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2020
Mailing Address 705 MELVIN AVE #105		FEC Identification Number C [ ] <b>Transaction ID : SB21B.22686</b> Amount of Each Disbursement this Period [ ] 19181.25
City ANNAPOLIS	State MD	Zip Code 21401
Purpose of Disbursement POLLING EXPENSE		Category/Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. ONMESSAGE INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2020
Mailing Address 705 MELVIN AVE #105		FEC Identification Number C [ ] <b>Transaction ID : SB21B.22687</b> Amount of Each Disbursement this Period [ ] 23005.00
City ANNAPOLIS	State MD	Zip Code 21401
Purpose of Disbursement POLLING EXPENSE		Category/Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 66482.50
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. ONMESSAGE INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2020
Mailing Address 705 MELVIN AVE #105		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.22687</b>
City ANNAPOLIS	State MD	Zip Code 21401
Purpose of Disbursement POLLING EXPENSE		Amount of Each Disbursement this Period [REDACTED] 24350.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. OPINION INSIGHT, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2020
Mailing Address 18 VILLAGE COURT		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.22689</b>
City HAZLET	State NJ	Zip Code 07730
Purpose of Disbursement POLLING EXPENSE		Amount of Each Disbursement this Period [REDACTED] 30500.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. STRIPE</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020
Mailing Address 3180 18TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.22687</b>
City SAN FRANCISCO	State CA	Zip Code 94110
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period [REDACTED] 0.03
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 54850.03
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER: (check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2020

FEC Identification Number

C [ ]

Transaction ID : SB21B.22687

Amount of Each Disbursement this Period

[ ] 1587.41

Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 16 / 2020

FEC Identification Number

C [ ]

Transaction ID : SB21B.22688

Amount of Each Disbursement this Period

[ ] 397.67

Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 19 / 2020

FEC Identification Number

C [ ]

Transaction ID : SB21B.22688

Amount of Each Disbursement this Period

[ ] 300.89

Memo Item

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

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

[ ] 2285.97

[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.22688  
Amount of Each Disbursement this Period  
510.83

Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 21 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.22688  
Amount of Each Disbursement this Period  
859.73

Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 22 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.22688  
Amount of Each Disbursement this Period  
184.82

Memo Item

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

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

1555.38



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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY  
10 / 23 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.22688  
Amount of Each Disbursement this Period  
161.61

Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY  
10 / 26 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.22688  
Amount of Each Disbursement this Period  
234.04

Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY  
10 / 27 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.22688  
Amount of Each Disbursement this Period  
1023.00

Memo Item

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

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

1418.65

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 28 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.22688  
Amount of Each Disbursement this Period  
5541.62

Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 29 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.22688  
Amount of Each Disbursement this Period  
15.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.22741  
Amount of Each Disbursement this Period  
90.00

Memo Item

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

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

5646.62

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 03 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.22741  
Amount of Each Disbursement this Period  
60.44

Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 04 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.22741  
Amount of Each Disbursement this Period  
0.59

Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 05 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.22741  
Amount of Each Disbursement this Period  
15.00

Memo Item

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

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

76.03

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 06 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.22741  
Amount of Each Disbursement this Period  
1.03

Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 09 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.22741  
Amount of Each Disbursement this Period  
79.65

Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 10 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.22741  
Amount of Each Disbursement this Period  
15.00

Memo Item

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

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

95.68

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 12 / 2020

FEC Identification Number

C

Transaction ID : SB21B.22741

Amount of Each Disbursement this Period

68.27

Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2020

FEC Identification Number

C

Transaction ID : SB21B.22741

Amount of Each Disbursement this Period

18.54

Memo Item

Full Name (Last, First, Middle Initial)

**C. TARGETED VICTORY, LLC**

Mailing Address 2311 WILSON BLVD  
SUITE 200

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement  
CREATIVE FEES AND DIGITAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 22 / 2020

FEC Identification Number

C

Transaction ID : SB21B.22688

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

1086.81

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. TARGETED VICTORY, LLC**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			22			2020			

Mailing Address 2311 WILSON BLVD  
SUITE 200

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement  
CREATIVE FEES AND DIGITAL CONSULTING

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.22689  
Amount of Each Disbursement this Period

[REDACTED] 5000.00

Memo Item

Candidate Name

Category/  
Type

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

State: District:

Full Name (Last, First, Middle Initial)

**B. TARGETED VICTORY, LLC**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			22			2020			

Mailing Address 2311 WILSON BLVD  
SUITE 200

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement  
CREATIVE FEES AND DIGITAL CONSULTING

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.22689  
Amount of Each Disbursement this Period

[REDACTED] 10750.00

Memo Item

Candidate Name

Category/  
Type

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

State: District:

Full Name (Last, First, Middle Initial)

**C. TARGETED VICTORY, LLC**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			22			2020			

Mailing Address 2311 WILSON BLVD  
SUITE 200

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement  
CREATIVE FEES AND DIGITAL CONSULTING

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.22689  
Amount of Each Disbursement this Period

[REDACTED] 10750.00

Memo Item

Candidate Name

Category/  
Type

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

State: District:

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

[REDACTED] 26500.00

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. TARGETED VICTORY, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2020

Mailing Address 2311 WILSON BLVD  
SUITE 200

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement  
DIGITAL CONSULTING

FEC Identification Number

C [REDACTED]

Transaction ID : **SB21B.22689**  
Amount of Each Disbursement this Period

[REDACTED] 7500.00

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**B. TARGETED VICTORY, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		02		2020

Mailing Address 2311 WILSON BLVD  
SUITE 200

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement  
ONLINE ADVERTISING [SB21B.165820] REALLOCATED TO  
INDEPENDENT EXPENDITURE [SE 2218211]

FEC Identification Number

C [REDACTED]

Transaction ID : **SB21B.23006**  
Amount of Each Disbursement this Period

[REDACTED] - 30567.28

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**C. TARGETED VICTORY, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		06		2020

Mailing Address 2311 WILSON BLVD  
SUITE 200

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement  
SMS TEXT POLLING EXPENSE

FEC Identification Number

C [REDACTED]

Transaction ID : **SB21B.22741**  
Amount of Each Disbursement this Period

[REDACTED] 15449.33

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

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

[REDACTED] - 7617.95

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. THE BRIDGEWATER MARRIOTT**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 700 COMMONS WAY

M M M	/	D D D	/	Y Y Y Y Y
10		21		2020

City BRIDGEWATER State NJ Zip Code 08807

FEC Identification Number

Purpose of Disbursement  
TRAVEL: LODGING

**C**

Candidate Name

Category/  
Type

**Transaction ID : SB21B.22686**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

3327.33

State: District:

Memo Item

**B. THREE ARBOR INSURANCE INC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 421 OFFICE PARK DR

M M M	/	D D D	/	Y Y Y Y Y
11		17		2020

City BIRMINGHAM State AL Zip Code 35223

FEC Identification Number

Purpose of Disbursement  
D&O INSURANCE

**C**

Candidate Name

Category/  
Type

**Transaction ID : SB21B.22742**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

264228.00

State: District:

Memo Item

**C. TRUMP INTERNATIONAL HOTEL**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1100 PENNSYLVANIA AVE. NW

M M M	/	D D D	/	Y Y Y Y Y
10		19		2020

City WASHINGTON State DC Zip Code 20004

FEC Identification Number

Purpose of Disbursement  
EVENT EXPENSE: CATERING EXPENSE

**C**

Candidate Name

Category/  
Type

**Transaction ID : SB21B.22686**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

5830.00

State: District:

Memo Item

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

273385.33

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. TRUMP INTERNATIONAL HOTEL**

Mailing Address 1100 PENNSYLVANIA AVE. NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement  
EVENT EXPENSE: FACILITIES RENTAL AND CATERING SERVICES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
10 / 19 / 2020

FEC Identification Number

C [ ]

Transaction ID : SB21B.22686  
Amount of Each Disbursement this Period

[ ] 15746.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. XACT DATA DISCOVERY**

Mailing Address 5800 FOXRIDGE DR  
STE 406

City MISSION State KS Zip Code 66202

Purpose of Disbursement  
DATA ANALYSIS

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2020

FEC Identification Number

C [ ]

Transaction ID : SB21B.22742  
Amount of Each Disbursement this Period

[ ] 525.84

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

MM / DD / YYYY

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)..... ▶

[ ] 16271.84

[ ] 1610218.76

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

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

FOR LINE NUMBER:  
(check only one)

<input 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) <b>A. EBERHART, DAN, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2020
Mailing Address 7131 E RANCHO VISTA DR. 6001		FEC Identification Number C [ ] <b>Transaction ID : SB28A.23007</b>
City SCOTTSDALE	State AZ	Zip Code 85251
Purpose of Disbursement CONTRIBUTION REFUND		Amount of Each Disbursement this Period 5000.00
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. TONERQUEST, INC</b>		Date of Disbursement MM / DD / YYYY 11 / 16 / 2020
Mailing Address 241 37TH ST STE 302		FEC Identification Number C [ ] <b>Transaction ID : SB28A.22742</b>
City BROOKLYN	State NY	Zip Code 11232
Purpose of Disbursement CONTRIBUTION REFUND		Amount of Each Disbursement this Period 25000.00
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C [ ]
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	30000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	30000.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 99 OF 129
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>BASSWOOD RESEARCH</b>			Nature of Debt (Purpose): POLLING EXPENSE
Mailing Address AIR RIGHTS CENTER, NORTH TOWER 4550 MONTGOMERY AVE			
City BETHESDA	State MD	Zip Code 20814	

Outstanding Balance Beginning This Period <input type="text" value="23345.00"/>	<b>Transaction ID : SD10.201599</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="23345.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ONMESSAGE INC.</b>			Nature of Debt (Purpose): POLLING EXPENSE
Mailing Address 705 MELVIN AVE #105			
City ANNAPOLIS	State MD	Zip Code 21401	

Outstanding Balance Beginning This Period <input type="text" value="24296.25"/>	<b>Transaction ID : SD10.201604</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="24296.25"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ONMESSAGE INC.</b>			Nature of Debt (Purpose): POLLING EXPENSE
Mailing Address 705 MELVIN AVE #105			
City ANNAPOLIS	State MD	Zip Code 21401	

Outstanding Balance Beginning This Period <input type="text" value="19181.25"/>	<b>Transaction ID : SD10.201606</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="19181.25"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 100 OF 129
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ONMESSAGE INC.</b>			Nature of Debt (Purpose): POLLING EXPENSE
Mailing Address 705 MELVIN AVE #105			
City ANNAPOLIS	State MD	Zip Code 21401	

Outstanding Balance Beginning This Period	Transaction ID : SD10.230062	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="3000.00"/>	<input type="text" value="0.00"/>	<input type="text" value="3000.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>THE BRIDGEWATER MARRIOTT</b>			Nature of Debt (Purpose): TRAVEL: LODGING
Mailing Address 700 COMMONS WAY			
City BRIDGEWATER	State NJ	Zip Code 08807	

Outstanding Balance Beginning This Period	Transaction ID : SD10.201602	
<input type="text" value="3327.33"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="3327.33"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>TRUMP INTERNATIONAL HOTEL</b>			Nature of Debt (Purpose): EVENT STAGING EXPENSE
Mailing Address 1100 PENNSYLVANIA AVE. NW			
City WASHINGTON	State DC	Zip Code 20004	

Outstanding Balance Beginning This Period	Transaction ID : SD10.201600	
<input type="text" value="5830.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="5830.00"/>	<input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="3000.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 101 OF 129
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>TRUMP INTERNATIONAL HOTEL</b>			Nature of Debt (Purpose): EVENT EXPENSE: FACILITIES RENTAL AND CATERING
Mailing Address 1100 PENNSYLVANIA AVE. NW			
City WASHINGTON	State DC	Zip Code 20004	

Outstanding Balance Beginning This Period		Transaction ID : SD10.201601	
15746.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	15746.00	0.00	

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) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	0.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	3000.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	3000.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
BIG DOG STRATEGIES LLC
Memo Item

Date of Public Distribution/Dissemination
10 / 21 / 2020

Mailing Address
PO BOX 21

Amount
439363.66

City State Zip Code
CLARENCE CENTER NY 14032

Transaction ID : SE.201638

Purpose of Expenditure
DIRECT MAIL: PRINTING AND POSTAGE
Category/Type

Date of Disbursement or Obligation
10 / 19 / 2020

Name of Federal Candidate:
BIDEN, JOSEPH R JR, ,
Support Oppose

Office Sought:
House Senate
President State:

Calendar Year-To-Date
Per Election for Office Sought
101888522.37

Disbursement For:
Primary General
Other (specify)

Full Name of Payee
CHECKMATE STRATEGIES, LLC
Memo Item

Date of Public Distribution/Dissemination
10 / 21 / 2020

Mailing Address
5 BANYAN COURT

Amount
350081.19

City State Zip Code
JACKSON NJ 08527

Transaction ID : SE.201624

Purpose of Expenditure
DIRECT MAIL: PRINTING AND POSTAGE
Category/Type

Date of Disbursement or Obligation
10 / 19 / 2020

Name of Federal Candidate:
BIDEN, JOSEPH R JR, ,
Support Oppose

Office Sought:
House Senate
President State:

Calendar Year-To-Date
Per Election for Office Sought
100748989.79

Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
789444.85

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature: PROCH, JON, , , [Electronically Filed]

Date: 12 / 03 / 2020

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>AMERICA FIRST ACTION, INC.</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> 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 <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 21 / 2020						
Mailing Address <b>5 BANYAN COURT</b>	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">44537.84</div> Transaction ID : <b>SE.201626</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2020						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>JACKSON</td> <td>NJ</td> <td>08527</td> </tr> </table>		City	State	Zip Code	JACKSON	NJ	08527
City		State	Zip Code				
JACKSON	NJ	08527					
Purpose of Expenditure DIRECT MAIL: PRINTING AND POSTAGE							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <b>BIDEN, JOSEPH R JR, , ,</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">100793527.63</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>CHECKMATE STRATEGIES, LLC</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 21 / 2020						
Mailing Address <b>5 BANYAN COURT</b>	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">415631.08</div> Transaction ID : <b>SE.201628</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2020						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>JACKSON</td> <td>NJ</td> <td>08527</td> </tr> </table>		City	State	Zip Code	JACKSON	NJ	08527
City		State	Zip Code				
JACKSON	NJ	08527					
Purpose of Expenditure DIRECT MAIL: PRINTING AND POSTAGE							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <b>BIDEN, JOSEPH R JR, , ,</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">101209158.71</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" 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;">460168.92</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  
12 / 03 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee CHECKMATE STRATEGIES, LLC
Mailing Address 5 BANYAN COURT
City JACKSON State NJ Zip Code 08527
Purpose of Expenditure DIRECT MAIL: POSTAGE
Category/Type
Date of Public Distribution/Dissemination 10/20/2020
Amount 1337.78
Transaction ID: SE.204154
Date of Disbursement or Obligation 10/20/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 101889860.15

Full Name of Payee COMPELLING STRATEGIES LLC
Mailing Address 1784 SHELL RING CIRCLE
City MT. PLEASANT State SC Zip Code 29466
Purpose of Expenditure DIRECT MAIL: PRINTING AND POSTAGE
Category/Type
Date of Public Distribution/Dissemination 10/16/2020
Amount 73073.19
Transaction ID: SE.194459
Date of Disbursement or Obligation 10/16/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 94884441.41

(a) SUBTOTAL of Itemized Independent Expenditures 74410.97
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature: PROCH, JON, , [Electronically Filed] Date: 12/03/2020



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: TV
Category/Type
Date of Public Distribution/Dissemination 10/21/2020
Amount 611782.40
Transaction ID: SE.201611
Date of Disbursement or Obligation 10/15/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 89998978.12

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: SATELLITE TV
Category/Type
Date of Public Distribution/Dissemination 10/21/2020
Amount 91514.67
Transaction ID: SE.201616
Date of Disbursement or Obligation 10/15/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 90090492.79

(a) SUBTOTAL of Itemized Independent Expenditures 703297.07
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PROCH, JON, ,

[Electronically Filed]

Date 12/03/2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: TV
Category/Type
Date of Public Distribution/Dissemination 10/21/2020
Amount 3489620.87
Transaction ID: SE.201618
Date of Disbursement or Obligation 10/15/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 93580113.66

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: RADIO
Category/Type
Date of Public Distribution/Dissemination 10/21/2020
Amount 131556.46
Transaction ID: SE.201622
Date of Disbursement or Obligation 10/15/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 93711670.12

(a) SUBTOTAL of Itemized Independent Expenditures 3621177.33
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PROCH, JON, ,

[Electronically Filed]

Date 12/03/2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: TV
Category/Type
Date of Public Distribution/Dissemination 10/21/2020
Amount 748714.12
Transaction ID: SE.201630
Date of Disbursement or Obligation 10/15/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 94460384.24

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: RADIO
Category/Type
Date of Public Distribution/Dissemination 10/21/2020
Amount 50983.98
Transaction ID: SE.201632
Date of Disbursement or Obligation 10/15/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 94511368.22

(a) SUBTOTAL of Itemized Independent Expenditures 799698.10
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature: PROCH, JON, , [Electronically Filed] Date: 12/03/2020

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: RADIO
Category/Type
Date of Public Distribution/Dissemination 10/17/2020
Amount 180650.00
Transaction ID: SE.194462
Date of Disbursement or Obligation 10/16/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 95065091.41

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: TV
Category/Type
Date of Public Distribution/Dissemination 10/21/2020
Amount 376382.50
Transaction ID: SE.201609
Date of Disbursement or Obligation 10/16/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 95441473.91

(a) SUBTOTAL of Itemized Independent Expenditures 557032.50
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PROCH, JON, ,

[Electronically Filed]

Date 12/03/2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
DEL RAY MEDIA LLC
Mailing Address
1427 LESLIE AVE
City
ALEXANDRIA State
VA Zip Code
22301
Purpose of Expenditure
PLACED MEDIA: TV Category/
Type

Date of Public Distribution/Dissemination
10 / 21 / 2020
Amount
1514938.50
Transaction ID : SE.201636
Date of Disbursement or Obligation
10 / 16 / 2020

Name of Federal Candidate:
BIDEN, JOSEPH R JR, , ,
Support Oppose
Calendar Year-To-Date
Per Election for Office Sought
96956412.41

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

Full Name of Payee
DEL RAY MEDIA LLC
Mailing Address
1427 LESLIE AVE
City
ALEXANDRIA State
VA Zip Code
22301
Purpose of Expenditure
PLACED MEDIA: TV Category/
Type

Date of Public Distribution/Dissemination
10 / 28 / 2020
Amount
695365.40
Transaction ID : SE.204161
Date of Disbursement or Obligation
10 / 16 / 2020

Name of Federal Candidate:
BIDEN, JOSEPH R JR, , ,
Support Oppose
Calendar Year-To-Date
Per Election for Office Sought
97651777.81

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

(a) SUBTOTAL of Itemized Independent Expenditures
2210303.90
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature
PROCH, JON, , ,
[Electronically Filed]

Date
12 / 03 / 2020

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: TV
Category/Type
Date of Public Distribution/Dissemination 10/28/2020
Amount 746831.89
Transaction ID: SE.204170
Date of Disbursement or Obligation 10/16/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 98398609.70

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: RADIO
Category/Type
Date of Public Distribution/Dissemination 10/28/2020
Amount 65501.63
Transaction ID: SE.204172
Date of Disbursement or Obligation 10/16/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 98464111.33

(a) SUBTOTAL of Itemized Independent Expenditures 812333.52
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature: PROCH, JON, , [Electronically Filed] Date: 12/03/2020

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: TV
Category/Type
Date of Public Distribution/Dissemination 10/21/2020
Amount 608447.50
Transaction ID: SE.204156
Date of Disbursement or Obligation 10/20/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 102498307.65

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: TV
Category/Type
Date of Public Distribution/Dissemination 10/28/2020
Amount 380477.50
Transaction ID: SE.204159
Date of Disbursement or Obligation 10/20/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 102878785.15

(a) SUBTOTAL of Itemized Independent Expenditures 988925.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature PROCH, JON, ,

[Electronically Filed]

Date 12/03/2020

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: TV
Category/Type
Date of Public Distribution/Dissemination 10/28/2020
Amount 4636336.13
Transaction ID: SE.204164
Date of Disbursement or Obligation 10/20/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 107515121.28

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: SATELLITE TV
Category/Type
Date of Public Distribution/Dissemination 10/28/2020
Amount 113566.89
Transaction ID: SE.204166
Date of Disbursement or Obligation 10/20/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 107628688.17

(a) SUBTOTAL of Itemized Independent Expenditures 4749903.02
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Signature: PROCH, JON, , [Electronically Filed] Date: 12/03/2020



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: RADIO
Category/Type
Date of Public Distribution/Dissemination 10/28/2020
Amount 153608.68
Transaction ID: SE.204168
Date of Disbursement or Obligation 10/20/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 107782296.85

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: TV
Category/Type
Date of Public Distribution/Dissemination 10/28/2020
Amount 1605139.20
Transaction ID: SE.204174
Date of Disbursement or Obligation 10/20/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 109387436.05

(a) SUBTOTAL of Itemized Independent Expenditures 1758747.88
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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PROCH, JON, ,

[Electronically Filed]

Date

12/03/2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: TV
Category/Type
Date of Public Distribution/Dissemination 10/23/2020
Amount 6845651.00
Transaction ID: SE.206694
Date of Disbursement or Obligation 10/21/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 116273087.05

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: TV
Category/Type
Date of Public Distribution/Dissemination 10/24/2020
Amount 760000.00
Transaction ID: SE.209210
Date of Disbursement or Obligation 10/22/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 117033087.05

(a) SUBTOTAL of Itemized Independent Expenditures 7605651.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Signature: PROCH, JON, , [Electronically Filed] Date: 12/03/2020

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: TV
Category/Type
Date of Public Distribution/Dissemination 10/28/2020
Amount 400150.00
Transaction ID: SE.209218
Date of Disbursement or Obligation 10/23/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 117548337.05

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: RADIO
Category/Type
Date of Public Distribution/Dissemination 10/27/2020
Amount 136632.56
Transaction ID: SE.214256
Date of Disbursement or Obligation 10/27/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 117999969.61

(a) SUBTOTAL of Itemized Independent Expenditures 536782.56
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: TV
Category/Type
Date of Public Distribution/Dissemination 10/28/2020
Amount 259767.44
Transaction ID: SE.214258
Date of Disbursement or Obligation 10/27/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 118259737.05

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: TV
Category/Type
Date of Public Distribution/Dissemination 10/29/2020
Amount 3500000.00
Transaction ID: SE.216777
Date of Disbursement or Obligation 10/28/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 122342737.05

(a) SUBTOTAL of Itemized Independent Expenditures 3759767.44
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature: PROCH, JON, , [Electronically Filed] Date: 12/03/2020

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: RADIO
Category/Type
Date of Public Distribution/Dissemination 10/30/2020
Amount 200000.00
Transaction ID: SE.219301
Date of Disbursement or Obligation 10/30/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 123672737.05

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: TV
Category/Type
Date of Public Distribution/Dissemination 10/31/2020
Amount 3000000.00
Transaction ID: SE.219304
Date of Disbursement or Obligation 10/30/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 126672737.05

(a) SUBTOTAL of Itemized Independent Expenditures 3200000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PROCH, JON, ,

[Electronically Filed]

Date 12/03/2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: TV
Category/Type
Date of Public Distribution/Dissemination 10/31/2020
Amount 300000.00
Transaction ID: SE.219310
Date of Disbursement or Obligation 10/30/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 127672737.05

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: TV
Category/Type
Date of Public Distribution/Dissemination 11/02/2020
Amount 300000.00
Transaction ID: SE.221827
Date of Disbursement or Obligation 11/02/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 127972737.05

(a) SUBTOTAL of Itemized Independent Expenditures 600000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Signature PROCH, JON, ,

[Electronically Filed]

Date 12/03/2020

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee M&B ANALYTICS
Mailing Address P.O. BOX 2583
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure GOTV: VOTER PHONE CALLS
Category/Type
Date of Public Distribution/Dissemination 10/30/2020
Amount 820000.00
Transaction ID: SE.219297
Date of Disbursement or Obligation 10/30/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 123272737.05

Full Name of Payee M&B ANALYTICS
Mailing Address P.O. BOX 2583
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure GOTV: VOTER PHONE CALLS
Category/Type
Date of Public Distribution/Dissemination 10/30/2020
Amount 200000.00
Transaction ID: SE.219299
Date of Disbursement or Obligation 10/30/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 123472737.05

(a) SUBTOTAL of Itemized Independent Expenditures 1020000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Signature PROCH, JON, ,

[Electronically Filed]

Date 12/03/2020

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee M&B ANALYTICS
Mailing Address P.O. BOX 2583
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure GOTV: VOTER PHONE CALLS
Date of Public Distribution/Dissemination 10/30/2020
Amount 200000.00
Transaction ID: SE.219308
Date of Disbursement or Obligation 10/30/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 127372737.05

Full Name of Payee M&B ANALYTICS
Mailing Address P.O. BOX 2583
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure GOTV: VOTER PHONE CALLS
Date of Public Distribution/Dissemination 11/02/2020
Amount 700000.00
Transaction ID: SE.221829
Date of Disbursement or Obligation 11/02/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 128672737.05

(a) SUBTOTAL of Itemized Independent Expenditures 900000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Signature: PROCH, JON, , [Electronically Filed] Date: 12/03/2020



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
ONMESSAGE INC.
Mailing Address
705 MELVIN AVE #105
City
ANNAPOLIS State
MD Zip Code
21401
Purpose of Expenditure
PRODUCTION COST: VIDEO
Category/Type
Date of Public Distribution/Dissemination
10 / 21 / 2020
Amount
40000.00
Transaction ID : SE.206690
Date of Disbursement or Obligation
10 / 21 / 2020

Name of Federal Candidate:
BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought:
House Senate State:
President
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
ONMESSAGE INC.
Mailing Address
705 MELVIN AVE #105
City
ANNAPOLIS State
MD Zip Code
21401
Purpose of Expenditure
PRODUCTION COST: VIDEO
Category/Type
Date of Public Distribution/Dissemination
10 / 23 / 2020
Amount
35000.00
Transaction ID : SE.209214
Date of Disbursement or Obligation
10 / 23 / 2020

Name of Federal Candidate:
BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought:
House Senate State:
President
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 75000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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PROCH, JON, ,

[Electronically Filed]

Date 12 / 03 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
REDPRINT STRATEGY
Mailing Address
1050 JOHNNIE DODDS BLVD
UNIT 2414
City
MOUNT PLEASANT
State
SC
Zip Code
29465
Purpose of Expenditure
PRODUCTION COST: VIDEO
Category/Type
Date of Public Distribution/Dissemination
10 / 24 / 2020
Amount
25000.00
Transaction ID : SE.209212
Date of Disbursement or Obligation
10 / 22 / 2020

Name of Federal Candidate:
BIDEN, JOSEPH R JR, ,
Support
Oppose
Office Sought:
President
Senate
State:
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
REDPRINT STRATEGY
Mailing Address
1050 JOHNNIE DODDS BLVD
UNIT 2414
City
MOUNT PLEASANT
State
SC
Zip Code
29465
Purpose of Expenditure
PRODUCTION COST: VIDEO
Category/Type
Date of Public Distribution/Dissemination
10 / 28 / 2020
Amount
5000.00
Transaction ID : SE.211733
Date of Disbursement or Obligation
10 / 26 / 2020

Name of Federal Candidate:
BIDEN, JOSEPH R JR, ,
Support
Oppose
Office Sought:
President
Senate
State:
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 30000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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PROCH, JON, ,

[Electronically Filed]

Date 12 / 03 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
REDPRINT STRATEGY
Mailing Address
1050 JOHNNIE DODDS BLVD
UNIT 2414
City
MOUNT PLEASANT
State
SC
Zip Code
29465
Purpose of Expenditure
PRODUCTION COST: VIDEO
Category/Type
Date of Public Distribution/Dissemination
10 / 26 / 2020
Amount
10000.00
Transaction ID : SE.211736
Date of Disbursement or Obligation
10 / 26 / 2020

Name of Federal Candidate:
BIDEN, JOSEPH R JR, ,
Support
Oppose
Office Sought:
President
House
Senate
State:
Disbursement For:
General
Primary
Other (specify)

Full Name of Payee
REDPRINT STRATEGY
Mailing Address
1050 JOHNNIE DODDS BLVD
UNIT 2414
City
MOUNT PLEASANT
State
SC
Zip Code
29465
Purpose of Expenditure
PRODUCTION COST: VIDEO
Category/Type
Date of Public Distribution/Dissemination
10 / 29 / 2020
Amount
10000.00
Transaction ID : SE.216779
Date of Disbursement or Obligation
10 / 29 / 2020

Name of Federal Candidate:
BIDEN, JOSEPH R JR, ,
Support
Oppose
Office Sought:
President
House
Senate
State:
Disbursement For:
General
Primary
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
20000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PROCH, JON, ,

[Electronically Filed]

Date
12 / 03 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
SOMETHING ELSE STRATEGIES, LLC
Memo Item

Date of Public Distribution/Dissemination
10 / 23 / 2020

Mailing Address
212 GOLDEN WILLOW COURT

Amount
55100.00
Transaction ID : SE.209216

City State Zip Code
EASLEY SC 29642

Date of Disbursement or Obligation
10 / 23 / 2020

Purpose of Expenditure
PRODUCTION COST: VIDEO
Category/Type

Name of Federal Candidate:
BIDEN, JOSEPH R JR, ,
Support Oppose

Office Sought:
House Senate
President State:
General

Calendar Year-To-Date
Per Election for Office Sought
117148187.05

Disbursement For:
Primary General
Other (specify)

Full Name of Payee
TARGETED VICTORY, LLC
Memo Item

Date of Public Distribution/Dissemination
10 / 15 / 2020

Mailing Address
2311 WILSON BLVD
SUITE 200

Amount
230000.00
Transaction ID : SE.191930

City State Zip Code
ARLINGTON VA 22201

Date of Disbursement or Obligation
10 / 15 / 2020

Purpose of Expenditure
DIGITAL ADVERTISING
Category/Type

Name of Federal Candidate:
BIDEN, JOSEPH R JR, ,
Support Oppose

Office Sought:
House Senate
President State:
General

Calendar Year-To-Date
Per Election for Office Sought
89387195.72

Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 285100.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Signature: PROCH, JON, , [Electronically Filed] Date: 12 / 03 / 2020

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
TARGETED VICTORY, LLC
Mailing Address
2311 WILSON BLVD
SUITE 200
City
ARLINGTON
State
VA
Zip Code
22201
Purpose of Expenditure
DIGITAL ADVERTISING
Category/Type

Date of Public Distribution/Dissemination
10 / 16 / 2020
Amount
300000.00
Transaction ID : SE.194452
Date of Disbursement or Obligation
10 / 16 / 2020

Name of Federal Candidate:
BIDEN, JOSEPH R JR, ,
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
94811368.22

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

Full Name of Payee
TARGETED VICTORY, LLC
Mailing Address
2311 WILSON BLVD
SUITE 200
City
ARLINGTON
State
VA
Zip Code
22201
Purpose of Expenditure
DIGITAL ADVERTISING
Category/Type

Date of Public Distribution/Dissemination
10 / 21 / 2020
Amount
250000.00
Transaction ID : SE.201613
Date of Disbursement or Obligation
10 / 19 / 2020

Name of Federal Candidate:
BIDEN, JOSEPH R JR, ,
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
98714111.33

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

(a) SUBTOTAL of Itemized Independent Expenditures ..... 550000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures .....

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PROCH, JON, ,
Signature

[Electronically Filed]

Date
12 / 03 / 2020

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee TARGETED VICTORY, LLC
Mailing Address 2311 WILSON BLVD SUITE 200
City ARLINGTON State VA Zip Code 22201
Purpose of Expenditure DIGITAL ADVERTISING
Date of Public Distribution/Dissemination 10/21/2020
Amount 1684797.27
Transaction ID : SE.201620
Date of Disbursement or Obligation 10/19/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 100398908.60

Full Name of Payee TARGETED VICTORY, LLC
Mailing Address 2311 WILSON BLVD SUITE 200
City ARLINGTON State VA Zip Code 22201
Purpose of Expenditure DIGITAL ADVERTISING
Date of Public Distribution/Dissemination 10/21/2020
Amount 240000.00
Transaction ID : SE.201634
Date of Disbursement or Obligation 10/19/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 101449158.71

(a) SUBTOTAL of Itemized Independent Expenditures 1924797.27
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Signature PROCH, JON, , [Electronically Filed] Date 12/03/2020

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee TARGETED VICTORY, LLC
Mailing Address 2311 WILSON BLVD SUITE 200
City ARLINGTON State VA Zip Code 22201
Purpose of Expenditure DIGITAL ADVERTISING
Date of Public Distribution/Dissemination 10/26/2020
Amount 300000.00
Transaction ID: SE.214253
Date of Disbursement or Obligation 10/26/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 117863337.05

Full Name of Payee TARGETED VICTORY, LLC
Mailing Address 2311 WILSON BLVD SUITE 200
City ARLINGTON State VA Zip Code 22201
Purpose of Expenditure DIGITAL ADVERTISING
Date of Public Distribution/Dissemination 10/28/2020
Amount 583000.00
Transaction ID: SE.216774
Date of Disbursement or Obligation 10/28/2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 118842737.05

(a) SUBTOTAL of Itemized Independent Expenditures 883000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Signature: PROCH, JON, , [Electronically Filed] Date: 12/03/2020

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
TARGETED VICTORY, LLC
Mailing Address
2311 WILSON BLVD
SUITE 200
City
ARLINGTON State
VA Zip Code
22201
Purpose of Expenditure
DIGITAL ADVERTISING
Category/Type

Date of Public Distribution/Dissemination
10 / 30 / 2020
Amount
100000.00
Transaction ID : SE.219295
Date of Disbursement or Obligation
10 / 30 / 2020

Name of Federal Candidate:
BIDEN, JOSEPH R JR, ,
Support
Oppose

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

Full Name of Payee
TARGETED VICTORY, LLC
Mailing Address
2311 WILSON BLVD
SUITE 200
City
ARLINGTON State
VA Zip Code
22201
Purpose of Expenditure
DIGITAL ADVERTISING
Category/Type

Date of Public Distribution/Dissemination
10 / 31 / 2020
Amount
500000.00
Transaction ID : SE.219306
Date of Disbursement or Obligation
10 / 30 / 2020

Name of Federal Candidate:
BIDEN, JOSEPH R JR, ,
Support
Oppose

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

(a) SUBTOTAL of Itemized Independent Expenditures 600000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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PROCH, JON, ,

[Electronically Filed]

Date 12 / 03 / 2020

Signature



**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>AMERICA FIRST ACTION, INC.</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00637512
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Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>TARGETED VICTORY, LLC</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 2311 WILSON BLVD SUITE 200		Amount <input type="text"/>	
City ARLINGTON	State VA	Zip Code 22201	Transaction ID : <b>SE.221831</b>
Purpose of Expenditure DIGITAL ADVERTISING		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: 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 <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation
Purpose of Expenditure		Category/ Type <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate:		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	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 <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<input type="text"/>
<b>(c) TOTAL</b> Independent Expenditures .....	<input type="text"/>

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PROCH, JON, , , [Electronically Filed] Date  /  /

Signature